

(No. 50.)



1888.

PARLIAMENT OF TASMANIA.

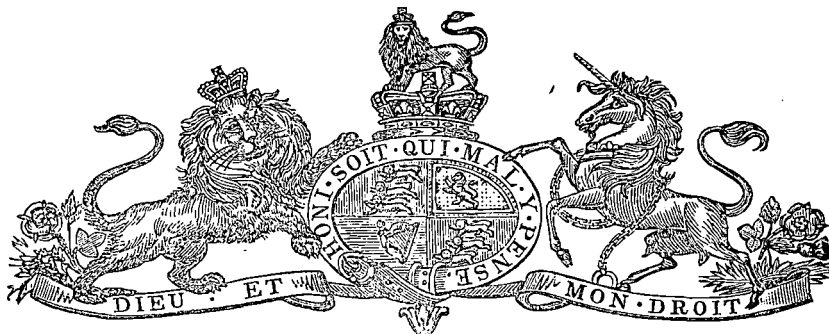
ROYAL COMMISSION ON CHARITABLE
INSTITUTIONS :

R E P O R T.

Presented to both Houses of Parliament by His Excellency's Command.

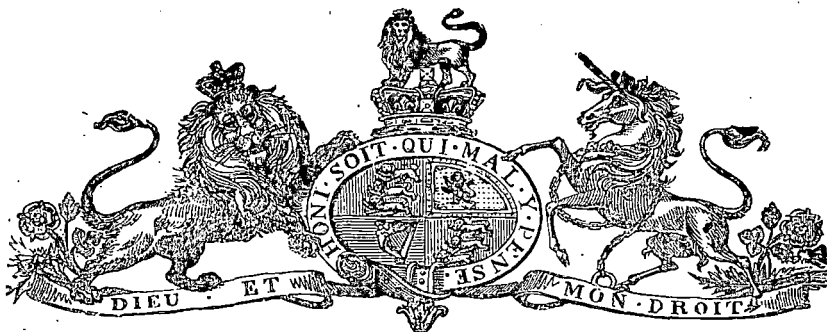
ROYAL COMMISSION
ON
THE CHARITABLE INSTITUTIONS OF
TASMANIA.

R E P O R T
OF
THE COMMISSIONERS,
WITH
EVIDENCE TAKEN AND OTHER DOCUMENTS.



Tasmania:
WILLIAM THOMAS STRUTT, GOVERNMENT PRINTER, TASMANIA.

1888.



Chief Secretary's Office, Hobart, 21st January, 1888.

SIR,

I HAVE the honor to forward herewith a Royal Commission which has been issued by His Excellency the Governor for the purpose of enquiring into the management and present condition of the whole of the Charitable Institutions of Tasmania, and appointing the under-mentioned gentlemen as Members :—

George Parker Fitzgerald, Esquire, M.H.A.
George Francis Huston, Esquire, M.H.A.
Henry Horatio Gill, Esquire, M.H.A.
William Belbin, Esquire, M.H.A.
Neil Elliott Lewis, Esquire, M.H.A.
The Honorable Henry Isidore Joachim Raphael Rooke, M.L.C.
Edward David Dobbie, Esquire, Crown Solicitor.
William Thomas Henry Brown, Esquire, M.H.A.
And yourself as Secretary.

You will be good enough to convene a meeting at which the Members are to be requested to elect their Chairman.

I have the honor to be,
Sir,

Your obedient Servant,

P. O. FYSH.

HENRY THOMAS MANING, *Esquire, Hobart.*

*VICTORIA, by the Grace of God of the United Kingdom of Great
Britain and Ireland Queen, Defender of the Faith.*

(Seal.)

To Our trusty and well-beloved GEORGE PARKER FITZGERALD, Esquire, Member of the House of Assembly, GEORGE FRANCIS HUSTON, Esquire, Member of the House of Assembly, HENRY HORATIO GILL, Esquire, Member of the House of Assembly, WILLIAM BELBIN, Esquire, Member of the House of Assembly, NEIL ELLIOTT LEWIS, Esquire, Member of the House of Assembly, the Honorable HENRY ISIDORE RAPHAEL JOACHIM ROOKE, Member of the Legislative Council, EDWARD DAVID DOBBIE, Esquire, Crown Solicitor, and WILLIAM THOMAS HENRY BROWN, Esquire, Member of the House of Assembly.

GREETING:

WHEREAS We have thought it expedient to enquire into the management and present condition of the whole of the Charitable Institutions of Tasmania: KNOW YE that We, reposing great trust and confidence in your fidelity, discretion, and integrity, have authorised and appointed, and by these presents do authorise and appoint you the said George Parker Fitzgerald, George Francis Huston, Henry Horatio Gill, William Belbin, Neil Elliott Lewis, the Honorable Henry Isidore Raphael Joachim Rooke, Edward David Dobbie, and William Thomas Henry Brown, or any Three or more of you, to make diligent enquiry into the management and present condition of the whole of the said Charitable Institutions of Tasmania: AND for the better discovery of the truth in the premises WE do by these presents give and grant unto you or any Three or more of you full power and authority to call before you all such persons as you shall judge necessary by whom you may obtain information in the premises: AND Our further will and pleasure is that you or any Three or more of you shall reduce into writing under your hands what you shall discover in the premises, and do and shall, on or before the Fifteenth day of March next, certify unto Us in Our Executive Council, in Tasmania, in writing under your hands respectively, your several proceedings by force of these presents, together with what you shall find touching or concerning the premises upon such enquiry as aforesaid: AND WE further will and command and by these presents ordain that this Our Commission shall continue in full force and virtue, and that you Our said Commissioners or any Three or more of you shall and may from time to time proceed in the execution hereof and of any matter or thing herein contained although the same be not continued from time to time by adjournment: AND WE do hereby command all and singular Our loving subjects whomsoever within Our said Colony of Tasmania that they be assistant to you in the execution of these presents: AND WE direct and appoint that HENRY THOMAS MANING, Esquire, shall be Secretary to Our said Commissioners, and we recommend that he be assistant in the execution of these presents.

IN TESTIMONY whereof We have caused these Our Letters to be made Patent, and the Seal of Our said Colony of Tasmania to be hereunto affixed.

WITNESS Our trusty and well-beloved SIR ROBERT GEORGE CROOKSHANK HAMILTON, Knight Commander of the Most Honorable Order of the Bath, Governor and Commander-in-Chief in and over the Colony of Tasmania and its Dependencies, at Hobart, in Tasmania aforesaid, this nineteenth day of January, one thousand eight hundred and eighty-eight.

R. G. C. HAMILTON.

By His Excellency's Command,

P. O. FYSH, *Chief Secretary.*

(Seal.)

KNOW ALL MEN by these presents that We will and command that the within written Commission shall continue in full force and virtue until the twentieth day of April next, anything in the said Commission contained to the contrary notwithstanding. IN TESTIMONY whereof We have caused the Public Seal of the Colony of Tasmania and its Dependencies to be hereunto affixed.

Dated the fifteenth day of March, one thousand eight hundred and eighty-eight.

R. G. C. HAMILTON.

By His Excellency's Command,

P. O. FYSH, *Chief Secretary.*

(Seal.)

KNOW ALL MEN by these presents that We will and command that the within written Commission shall continue in full force and virtue until the twenty-first day of May next, anything in the said Commission contained to the contrary notwithstanding. IN TESTIMONY whereof We have caused the Public Seal of the Colony of Tasmania and its Dependencies to be hereunto affixed.

Dated the seventeenth day of April, one thousand eight hundred and eighty-eight.

R. G. C. HAMILTON.

By His Excellency's Command,

P. O. FYSH, *Chief Secretary.*

(Seal.)

KNOW ALL MEN by these presents that We will and command that the within written Commission shall continue in full force and virtue until the twenty-eighth day of May next, anything in the said Commission contained to the contrary notwithstanding. IN TESTIMONY whereof We have caused the Public Seal of the Colony of Tasmania and its Dependencies to be hereunto affixed.

Dated the nineteenth day of May, one thousand eight hundred and eighty-eight.

R. G. C. HAMILTON.

By His Excellency's Command,

P. O. FYSH, *Chief Secretary.*

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*MINUTES of Proceedings of the ROYAL COMMISSION ON CHARITABLE INSTITUTIONS
IN TASMANIA, 1887.*

MEMBERS :

GEORGE PARKER FITZGERALD, Esq., M.H.A.

GEORGE FRANCIS HUSTON, Esq., M.H.A.

HENRY HORATIO GILL, Esq., M.H.A.

WILLIAM BELBIN, Esq., M.H.A.

NEIL ELLIOTT LEWIS, Esq., M.H.A.

The Hon. HENRY ISIDORE JOACHIM ROOKE, M.L.C.

EDWARD DAVID DOBBIE, Esq., *Crown Solicitor*.

WILLIAM HENRY THOMAS BROWN, Esq., M.H.A.

HENRY T. MANING, *Clerk Assistant House of Assembly, Secretary.*

WEDNESDAY, JANUARY 25, 1888.

The Commissioners met at 3 P.M.

The Secretary read the Commission.

Present—Mr. Dobbie, Mr. Brown, Mr. Fitzgerald, Mr. Belbin, and Mr. Lewis.

Mr. Fitzgerald took the Chair *pro tem*.

The Hon. Henry Rooke was appointed Chairman of the Commission.

The Secretary was instructed to inform Mr. Rooke of his appointment.

The Secretary was instructed to obtain copies of all the Parliamentary Reports on Government Charitable Institutions for the past year, and to request the Administrator of Charitable Grants to furnish the Commission with a list of the names and addresses of those persons to whom boarded-out children are entrusted.

Mr. W. J. McWilliams was appointed shorthand writer to the Commission.

The Commission adjourned at 4 P.M. till 3 P.M. on Tuesday, 31st instant.

TUESDAY, JANUARY 31, 1888.

The Commission met at 3 P.M.

Present—Mr. Brown, Mr. Fitzgerald, Mr. Lewis, Mr. Huston, Mr. Dobbie, and the Hon. H. I. Rooke (Chairman).

The Minutes of the last meeting were read and confirmed.

Resolved, That the Commissioners do first investigate those Charitable Institutions situate in Hobart, and that inquiry into the Administration of Charitable Grants be proceeded with on Thursday next, at 11 A.M.

Resolved, That Mr. John O'Boyle, Administrator of Charitable Grants, be summoned to attend and give evidence before the Commission on Thursday, the 2nd February, at 11 A.M.

Resolved, That the Commission do sit from 11 A.M. to 1 P.M., and from 2.15 P.M. to 4.15 P.M. on Tuesday, Wednesday, Thursday, and Friday in every week, unless circumstances should demand a special adjournment.

Resolved, That Mr. R. M. Johnston, Government Statistician, be requested to prepare, for the information of the Commissioners, a comparative statement of the expenses, &c. of Charitable Institutions in the various colonies.

The latest Parliamentary Reports from all Tasmanian Charitable Institutions were tabled.

The Commission adjourned at 3.50 P.M. until 11 A.M. on Thursday, the 2nd February.

THURSDAY, FEBRUARY 2, 1888.

The Commission met at 11 A.M.

Present—Mr. Brown, Dr. Huston, Mr. Fitzgerald, Mr. Dobbie, Mr. Lewis, and Hon. H. I. Rooke (Chairman).

The Minutes of the last meeting were read and confirmed.

The following documents were laid upon the table:—

(1.) Report of the Royal Commission on Charitable Institutions, 1871, H.A. Paper.

(2.) Return showing names and addresses of persons to whom the custody of boarded-out children is entrusted.

The following correspondence was tabled and read:—

(1.) From the Hon. the Chief Secretary approving of an advance of £100 to defray the expenses of the Commissioners.

(2.) Letter from the Hon. the Chief Secretary notifying the Governor's approval of the payment of 21s. per diem to each of the Commissioners as a personal allowance for each day during absence from home on the business of the Commission, and also of the payment of the travelling expenses of the Commission.

Resolved, That a Sub-committee, to consist of Mr. Lewis, Mr. Fitzgerald, and the Chairman, wait upon the Hon. the Chief Secretary with reference to the remuneration of the Commissioners.

Mr. John O'Boyle, Administrator of Charitable Grants, was called in and examined.

Mr. John O'Boyle withdrew.

Resolved, that the following witnesses be summoned to give evidence before the Commissioners:—Mr. G. Judge, Inspecting Officer Charitable Relief, at 2 P.M. to-day; Rev. J. W. Simmons, Chairman Executive Committee Benevolent Society, and Mr. W. Witt, Registrar, at 11.15 A.M. on Friday, the 3rd instant.

The Commission adjourned at 1 P.M.

The Commission re-assembled at 2.35 P.M.

Present—Mr. Lewis, Mr. Dobbie, Dr. Huston, Mr. Brown, Mr. Fitzgerald, and the Hon. H. I. Rooke (Chairman).

Mr. George Judge, Inspecting Officer Charitable Relief, was called in and examined.

Mr. Judge withdrew.

The Secretary was instructed to request the Honorable the Chief Secretary to supply the Commission with the weekly abstract of Charitable Grants, &c., supplied his department by the Administrator of Charitable Grants.

The Commissioners, accompanied by Mr. G. Judge, Inspecting Officer Charitable Grants, then inspected (notice not having been given of their intention,) the premises of the following persons to whom the care of boarded-out children was entrusted :—

1. Phoebe Easy ; 5 children.
2. Mary Sadler ; 5 children.
3. Margaret Demanse ; 3 children.
4. Catherine Handley ; 5 children.
5. Caroline Foster ; 1 child.

FRIDAY, FEBRUARY 3, 1888.

The Commission met at 11.15 A.M.

Present—Mr. Brown, Mr. Lewis, Mr. Dobbie, Dr. Huston, and the Honorable H. I. Rooke (Chairman).

The Minutes of the last meeting were read and confirmed.

Mr. W. Witt, Registrar of the Hobart Benevolent Society, was called in and examined.

Mr. Witt withdrew.

The Rev. J. W. Simmons, Chairman Executive Committee Benevolent Society, Hobart, was called in and examined.

The Rev. J. W. Simmons withdrew.

The Commission adjourned at 1 P.M.

The Commission re-assembled at 2.30 P.M.

Present—Mr. Brown, Mr. Dobbie, Dr. Huston, and the Chairman.

The Commissioners then proceeded to inspect the following Institutions :—

1. Girls' Industrial School, Hobart.
2. Girls' Reformatory, Hobart.
3. St. Joseph's Orphanage.
4. Boys' Home, Hobart.

TUESDAY, FEBRUARY 6, 1888.

The Commission met at 11.15 A.M.

Present—Mr. Gill, Mr. Belbin, Mr. Brown, and the Honorable H. I. Rooke (Chairman).

The Minutes of the last meeting were read and confirmed.

The Secretary tabled the following documents :—

1. A comparative statement of the Expenses, &c., of Charitable Institutions in the neighbouring Colonies, prepared by the Government Statistician.
2. Weekly Abstracts of Charitable Grants from Chief Secretary's Office.

The Commission adjourned at 12.15 until 11.15 A.M. on Tuesday, 14th February.

TUESDAY, FEBRUARY 14, 1888.

The Commission met at 11.15 A.M.

Present—Dr. Huston, Mr. W. T. H. Brown, Mr. Lewis, Mr. Dobbie, Mr. Gill, and the Hon. H. I. Rooke (Chairman).

The Minutes of the last meeting were read and confirmed.

The Report of the Special Committee on Hobart General Hospital (H. A. Paper 105) was tabled.

The Secretary tabled addenda to list of boarded-out children supplied by the Administrator of Charitable Grants on the 2nd instant.

Mr. Catley, Enquiring Officer Charitable Grants, was called in and examined.

Mr. Catley having tabled the following document—Diet Scale—withdraw.

Mr. George Judge, Inspecting Officer Charitable Relief, was called in and examined.

Mr. Judge withdrew.

The Commission adjourned at 12.30 P.M.

The Commission re-assembled at 2 P.M.

Present—Dr. Huston, Mr. Brown, Mr. Lewis, Mr. Dobbie, Mr. Gill, and the Hon. H. I. Rooke (Chairman).

The Commissioners then proceeded to inspect the following Institutions :—

1. Cascades Hospital for Insane.
2. Lying-in Hospital, Cascades.
3. Hospital for Contagious Diseases, Cascades.
4. Boys' Training School, Cascades.

TUESDAY, FEBRUARY 21, 1888.

The Commission met at 11:15 A.M.

Present—Mr. Belbin, Mr. Gill, Mr. W. T. H. Brown, Mr. Lewis, Mr. Dobbie, and the Hon. H. I. Rooke (Chairman).

The Minutes of the last meeting were read and confirmed.

Dr. John Coverdale, Surgeon-Superintendent of the Hospital for Insane, Cascades, was called in and examined.

Dr. Coverdale withdrew.

Mr. J. Evenden, Attendant Cascades Hospital for Insane, was called in and examined.

Mr. Evenden withdrew.

The Commission adjourned at 1 P.M.

The Commission re-assembled at 2 P.M.

Present—Mr. Dobbie, Mr. W. T. H. Brown, Mr. Lewis, Mr. Belbin, Mr. Gill, and the Hon. H. I. Rooke (Chairman).

The Commissioners then proceeded to inspect the Charitable Institution for Males and Females, New Town.

Resolved, That the following witnesses be summoned for Wednesday, the 22nd instant:—Mr. A. Muirhead, Head Keeper Cascades Lunatic Asylum, at 11:15 A.M.; Mr. S. Smith, Attendant ditto ditto, 11:45 A.M.; Dr. Smart, 2:15 P.M.

WEDNESDAY, FEBRUARY 22, 1888.

Present—Mr. Gill, Mr. W. T. H. Brown, Mr. Lewis, Mr. Dobbie, and the Hon. H. I. Rooke (Chairman).

The Minutes of the last meeting were read and confirmed.

A letter was received from Dr. Smart forwarding the following documents for the information of the Commissioners:—

1. Annual Report of Official Visitors, Hospital for Insane, 1887.
2. Interim ditto.

The Secretary was directed to acknowledge Dr. Smart's letter.

Mr. John Evenden was called in and examined.

Mr. Evenden withdrew.

Mr. A. Muirhead, Head Attendant, Cascades Hospital for Insane, was called in and examined.

Mr. Muirhead withdrew.

Mr. Samuel Smith, Attendant Cascades Hospital for Insane was called in and examined.

Mr. Samuel Smith withdrew.

The Commission adjourned at 1 P.M.

The Commission re-assembled at 2:15 P.M.

Present—Mr. Gill, Mr. W. T. H. Brown, Mr. Dobbie, and Hon. H. I. Rooke (Chairman).

Resolved, That Messrs. Galvin and Richards, Attendants at the Hospital for Insane, Cascades, be summoned to give evidence before the Commission this afternoon at 2:45 and 3 P.M. respectively.

Dr. Smart, late Official Visitors Hospitals for Insane, was called in and examined.

Dr. Smart withdrew.

Mr. Daniel Galvin, Attendant Cascades Hospital for Insane, was called in and examined.

Mr. Daniel Galvin withdrew.

Mr. Richards having appeared, was informed that his evidence was not necessary.

It was resolved that the New Norfolk Hospital for Insane be inspected to-morrow, and that the Commissioners leave by the morning train at 10:30 A.M.

THURSDAY, FEBRUARY 23, 1888.

The Commissioners met at the Bush Hotel, New Norfolk, at 2:30 P.M.

Present—Mr. Dobbie, Mr. Belbin, Mr. Gill, Mr. W. T. H. Brown, Mr. Fitzgerald, Dr. Huston, Mr. Lewis, and Hon. H. I. Rooke (Chairman).

The Minutes of the last Meeting were read and confirmed.

The Commissioners then inspected the Hospital for Insane, New Norfolk.

FRIDAY, FEBRUARY 24, 1888.

The Commission met at 11:15 A.M. in the Medical Superintendent's Room, Hospital for Insane, New Norfolk.

Present—Mr. Gill, Mr. Dobbie, Mr. Lewis, Mr. Brown, Dr. Huston, and the Hon. H. I. Rooke (Chairman).

The Minutes of the last meeting were read and confirmed.

Dr. Macfarlane, Medical Superintendent Hospital for Insane, was called in and examined.

Dr. Macfarlane withdrew.

Dr. J. P. Crampton, Assistant Medical Officer, was called in and examined.

Dr. Crampton withdrew.

The Commission adjourned at 1 P.M.

The Commission re-assembled at 2:30 P.M.

Present—Mr. Gill, Mr. Dobbie, Mr. Lewis, Mr. Brown, Dr. Huston, and the Hon. H. I. Rooke (Chairman).

Dr. Gray, Official Visitor, Hospitals for the Insane, was called in and examined.

Dr. Gray withdrew.

Mr. J. B. Brownell, Clerk and Storekeeper, was called in and examined.

Mr. Brownell withdrew.

Miss Selina Alexander, Matron, Hospital for the Insane, was called in and examined.

Miss Alexander withdrew.

~~Mr.~~ Mr. William Henry Bennet, Senior Attendant, Hospital for the Insane, New Norfolk, was called in and examined.

Mr. Bennet withdrew.

Mr. E. W. Bromfield, Senior Attendant, Hospital for the Insane, New Norfolk, was called in and examined.

Mr. Bromfield withdrew.

Mr. John Whiffin, Gardener, Hospital for the Insane, New Norfolk, was called in and examined.

Mr. Whiffin withdrew.

The following document was tabled :—

Doctors Maning, Dick, and Patterson's Report.

MONDAY, FEBRUARY 27, 1888.

Present—Mr. Gill, Mr. Belbin, Mr. Lewis, Dr. Huston, and the Hon. H. I. Rooke (Chairman).

The Minutes of the last meeting were read and confirmed.

Mr. Detective-Sergeant Delaney was called in and examined.

Mr. Detective-Sergeant Delaney withdrew.

Mr. G. Detective-Sergeant Franklin was called in and examined.

Mr. Detective-Sergeant Franklin withdrew.

A letter was received from Mr. John Evenden, of the Cascades, enclosing a circular *re* a washing machine, alluded to in his evidence before the Commission.

Ordered that the following witnesses be summoned to give evidence on Wednesday, 29th instant:—Colonel St. Hill, at 11:30 A.M.; Hon. Wm. Crosby, 11:30 A.M.; Dr. Charles Barnard, 12 o'clock; Mr. John Withrington, Superintendent Charitable Institutions, New Town, at 12 noon.

The Commission adjourned until Wednesday, the 29th instant.

WEDNESDAY, FEBRUARY 29, 1888.

Present—Mr. Gill, Mr. Belbin, Mr. Lewis, Mr. W. T. H. Brown, Dr. Huston, and the Hon. H. I. Rooke (Chairman).

The Minutes of the last meeting were read and confirmed.

Mr. John Withrington, Superintendent of the New Town Charitable Institution, was called in and examined.

Mr. Withrington withdrew.

Dr. Chas. E. Barnard, Medical Officer Charitable Institution, New Town, was called in and examined.

Dr. Barnard withdrew.

The Commission adjourned at 12:50 P.M.

The Commission re-assembled at 2:30 P.M.

Mr. Withrington was re-called, and his examination continued.

Mr. Withrington withdrew.

Mrs. Hurst, Matron Charitable Institution for Females, New Town, was called in and examined.

Mrs. Hurst withdrew.

Mr. Simon Murphy, Head Warder, was called in and examined.

Mr. Simon Murphy withdrew.

Ordered, That the following witnesses be summoned for Thursday, 1st March:—Mr. F. R. Seager, Assistant Superintendent and Storekeeper, New Town Charitable Institution, at 11:15 A.M.; Mr. James Longmore, Superintendent of the Boys' Training School, at 11:30 A.M.; Dr. C. E. Barnard, at 2:45 P.M.; Mr. F. W. Mitchell, at 2:30 P.M.

THURSDAY, MARCH 1, 1888.

The Commission met at 11:15 A.M.

Present—Mr. Gill, Mr. Belbin, Mr. Lewis, Mr. Brown, and Dr. Huston.

In the absence of the Chairman, Dr. Huston took the Chair.

The Minutes of the last meeting were read and confirmed.

Mr. F. R. Seager, Assistant-Superintendent and Storekeeper, New Town Charitable Institution, was called in and examined.

Mr. Seager withdrew.

Mr. F. W. Mitchell, Official Visitor, Hospital for the Insane, was called in and examined.

Mr. F. W. Mitchell withdrew.

The Commission adjourned at 1:5 P.M.

The Commission re-assembled at 2:15 P.M.

Present—Mr. Gill, Mr. Belbin, Mr. Lewis, Mr. Brown, and Dr. Huston.

Mr. James Longmore, Superintendent Boys' Training School, Hobart, was called in and examined.

Mr. James Longmore withdrew.

Resolved, That the Commission do adjourn till Monday, the 5th instant, then proceed to Campbell Town, inspect the Hospital, and continue their journey to Launceston.

MONDAY, MARCH 5, 1888.

The Commission met at *Kean's Hotel*, Campbell Town, at 12.10 P.M.

Present—Mr. Belbin, Mr. Lewis, Mr. W. T. H. Brown, Mr. Dobbie, Mr. Gill, and Dr. Huston.

In the absence of the Chairman, Dr. Huston took the Chair.

The Minutes of the last meeting were read and confirmed.

The Campbell Town Hospital was then inspected.

The Commission adjourned at 1 P.M.

The Commission re-assembled at 2.15 P.M.

Present—Mr. Belbin, Mr. Lewis, Mr. Brown, Mr. Dobbie, Mr. Gill, and Dr. Huston (Chairman).

Dr. Naylor, Surgeon and Physician, was called in and examined.

Dr. Naylor withdrew.

Dr. R. W. Lethbridge, Medical Officer in charge of the Campbell Town Hospital, was called in and examined.

Dr. Lethbridge withdrew.

Mr. Harry Power, Chairman Board of Management, Campbell Town Hospital, was called in and examined.

Mr. Power withdrew.

Lieut.-Colonel Lethbridge, late Chairman of Trustees, Campbell Town Hospital, was called in and examined.

Lieut.-Colonel Lethbridge withdrew.

Resolved, That the inspection of the Launceston Charitable Institutions be proceeded with to-morrow.

The Commission adjourned at 4.30 P.M.

TUESDAY, MARCH 6, 1888.

The Commission met at the Ministerial Office, Public Buildings, Launceston, at 2.20 P.M.

Present—Mr. Dobbie, Mr. W. T. H. Brown, Mr. Gill, Mr. Belbin, Dr. Huston, and the Hon. H. I. Rooke (Chairman).

The Minutes of the last meeting were read and confirmed.

The Commissioners then proceeded to inspect the following Institutions:—

1. The Hospital for Contagious Diseases, Launceston.

2. The Invalid Depot, Launceston, Female Branch.

Resolved, That Captain Ditcham, the Rev. G. Marshall, and Mr. Fraser be summoned to give evidence on Wednesday, the 7th instant, at 11 A.M.

The Commission adjourned till 11.15 A.M. on Wednesday, the 7th instant.

WEDNESDAY, MARCH 7, 1888.

The Commission met at the Ministerial Office, Public Buildings, Launceston, at 11.15 A.M.

Present—Mr. Gill, Mr. Belbin, Mr. W. T. H. Brown, Mr. Dobbie, Dr. Huston, Mr. Lewis, and the Hon. H. I. Rooke (Chairman).

The Minutes of the last meeting were read and confirmed.

Captain Ditcham, Chairman Benevolent Society, Launceston, was called in and examined.

Captain Ditcham withdrew.

Mr. Hugh Fraser, Secretary to the Launceston Benevolent Society, was called in and examined.

Mr. Fraser withdrew.

The Secretary laid upon the Table H.A. Paper No. 11, Report Invalid Depot, Launceston, and H.A. Paper, No. 20.

Mr. R. Marshall, Town Missionary, was called in and examined.

Mr. R. Marshall withdrew.

Mr. A. Kirkland, Government Inquiring Officer, was called in and examined.

Mr. Kirkland withdrew.

The Commission adjourned at 12.55 P.M.

The Commission re-assembled at 2.15 P.M.

Present—Mr. Brown, Mr. Gill, Mr. Lewis, Mr. Dobbie, Dr. Huston, Mr. Belbin, and the Hon. H. I. Rooke (Chairman).

Mr. Alfred Jones, Superintendent Invalid Depot, Launceston, called in and examined.

Mr. Jones withdrew.

Mrs. Paul, Matron Invalid Depot, Launceston, was called in and examined.

Mrs. Paul withdrew.

Mr. Richard Venus, Resident Overseer, Invalid Depot, Launceston, was called in and examined.

Mr. Venus withdrew.

Resolved, That the Girls' Industrial School, the site for the proposed new Gaol and Invalid Depot, and the General Hospital, be inspected to-morrow.

The Commission adjourned till 11.15 on Thursday, the 8th March.

THURSDAY, MARCH 8, 1888.

The Commission met at 2.15 P.M.

Present—Mr. W. T. H. Brown, Mr. Belbin, Mr. Dobbie, Mr. Lewis, Mr. Gill, Dr. Huston, and the Hon. H. I. Rooke (Chairman).

The Minutes of the last meeting were read and confirmed.

Dr. L. G. Thompson, Surgeon-Superintendent Launceston General Hospital, called in and examined.

Dr. Thompson withdrew.

Mr. B. R. Traggit, Storekeeper, Launceston General Hospital, was called in and examined.

Mr. Traggit withdrew.

Mr. George T. Collins, Chairman Launceston Charitable Institution, called in and examined.

Mr. Collins withdrew.

The Chairman reported that he, in company with the Commissioners, had devoted the morning to making a careful inspection of the Launceston Girls' Industrial School and the Launceston General Hospital.

Resolved, That Mrs. Beard, Matron of the Launceston Girls' Industrial, and Mr. W. Barnes, Chairman of the Visiting Committee, Launceston General Hospital, be summoned to give evidence on Friday, the 9th instant, at 11.15 and 12 o'clock respectively.

The Commission adjourned at 5.30 P.M.

FRIDAY, MARCH 9, 1888.

The Commission met at 11.15 A.M.

Present—Mr. Belbin, Mr. Dobbie, Mr. W. T. H. Brown, Mr. Gill, Mr. Lewis, Dr. Huston, and the Hon. H. I. Rooke (Chairman).

The Minutes of the last meeting were read and confirmed.

Miss Beard, Matron of the Girls' Industrial School, Launceston, was called in and examined.

Miss Beard withdrew.

Mr. Stansfield, Secretary to the Launceston Girls' Industrial School, was called in and examined.

Mr. Stansfield withdrew.

The Commission adjourned till Wednesday, the 21st March, at 11.15, to meet at the General Hospital, Hobart, and then proceeded to Hobart by the express train.

TUESDAY, MARCH 27, 1888.

The Commission met at the General Hospital, Hobart, at 11.15 A.M.

The whole of the Commissioners were present except Mr. Fitzgerald.

Dr. Crowther was called in.

Dr. Crowther lodged his protest against evidence not being taken on oath.

Dr. Crowther's examination was proceeded with.

It was decided by the Commission that certain questions put to Dr. Crowther by Mr. Gill were not within the scope of the inquiry.

Dr. Crowther withdrew.

The Commission adjourned at 1 P.M.

The Commission re-assembled at 2.15 P.M.

Present—Mr. Lewis, Dr. Huston, Mr. Gill, Mr. Brown, Mr. Dobbie, and the Hon. H. I. Rooke (Chairman).

Dr. Thomas Smart was called in and examined.

Dr. Smart withdrew.

WEDNESDAY, MARCH 28, 1888.

The Commission met at the General Hospital, Hobart, at 11.15 A.M.

Present.—Mr. Dobbie, Mr. W. T. H. Brown, Mr. Belbin, Mr. Gill, Mr. Lewis, and Dr. Huston.

In the absence of the Honorable H. I. Rooke, Dr. Huston took the Chair.

The Minutes of the last meeting were read and confirmed.

Dr. Parkinson, House-Surgeon, General Hospital, Hobart, was called in and examined.

Dr. Parkinson laid the Rules of the General Hospital, Hobart, on the Table.

The Commission adjourned at 1 P.M.

The Commission re-assembled at 2.15 P.M.

The examination of Dr. Parkinson was continued.

Dr. Parkinson withdrew.

The Commission adjourned until Wednesday, the 4th April, at 11.15 A.M.

WEDNESDAY, APRIL 4, 1888.

The Commission met at the General Hospital, Hobart, at 11.15 A.M.

Present.—Mr. Belbin, Mr. Lewis, Mr. W. T. H. Brown, Mr. Dobbie, and Dr. Huston.

In the absence of the Honorable H. I. Rooke, Dr. Huston took the Chair.

Dr. Parkinson was called in, and his examination continued.

Dr. Parkinson withdrew.

The Commission adjourned at 1 P.M.

The Commission re-assembled at 2.15 P.M.

Present.—Mr. Belbin, Mr. W. T. H. Brown, Dr. Huston, Mr. Dobbie, and the Honorable H. I. Rooke, (Chairman).

Dr. Lever, Assistant House-Surgeon, General Hospital, Hobart, was called in and examined.

Dr. Lever withdrew.

Mr. J. S. Morris, Secretary, House Steward, Clerk, and Storekeeper, General Hospital, Hobart, was called in and examined.

Mr. Morris withdrew.

The evidence of Mr. C. H. Grant, Manager of the Main Line Railway, and Mr. P. Kennar, both being patients, was taken.

The Secretary was instructed to summon Mr. C. Harbottle for 11.15 A.M. on Thursday, the 5th instant.

THURSDAY, APRIL 5, 1888.

The Commission met at the General Hospital, Hobart, at 11.15 A.M.

Present.—Mr. W. T. H. Brown, Mr. Dobbie, Dr. Huston, and the Honorable H. I. Rooke (Chairman).

The Minutes of the last Meeting were read and confirmed.

Mr. Collins, Wardsman, General Hospital, Hobart, was called in and examined.

Mr. Collins withdrew.

Mr. J. S. Morris, Secretary, General Hospital, Hobart, was re-called and examined.

Mr. Morris withdrew.

Mrs. Munro, Lady Superintendent, General Hospital, Hobart, was called and examined.

Mrs. Munro withdrew.

Miss Turnbull, Sister, General Hospital, was called in and examined.

Miss Turnbull withdrew.

The Commission adjourned at 1 P.M.

The Commission re-assembled at 2.15 P.M.

Present.—Dr. Huston, Mr. W. T. H. Brown, Mr. Dobbie, Mr. Lewis, and the Honorable H. I. Rooke (Chairman).

Mr. C. Harbottle was called in and examined.

Mr. Harbottle withdrew.

Dr. E. O. Giblin, Honorary Medical Officer, was called in and examined.

Dr. Giblin withdrew.

Dr. Butler, Honorary Medical Officer, was called in and examined.

Dr. Butler withdrew.

The Commission adjourned till Friday, April 6, at 11.30 A.M.

FRIDAY, APRIL 6, 1888.

The Commission met at the General Hospital, Hobart, at 11.30 A.M.

Present.—Mr. W. T. H. Brown, Mr. Dobbie, Mr. Lewis, Mr. Belbin, Dr. Huston, and Mr. Gill.

In the absence of the Chairman, Mr. Dobbie took the Chair.

The Minutes of the last meeting were read and confirmed.

Dr. Bingham Crowther was called in and examined.

Dr. Crowther withdrew.

Dr. Benjafield was called in and examined.

Dr. Benjafield withdrew.

The Commission adjourned at 1 P.M.

The Commission re-assembled at 2.30 P.M.

Present.—Mr. W. T. H. Brown, Mr. Lewis, Mr. Belbin, Dr. Huston, and Mr. Dobbie (Chairman *pro tem.*).

Dr. Smart was called in and examined.

Dr. Smart withdrew.

Dr. Bright, Honorary Medical Officer, was called in and examined.

Dr. Bright withdrew.

Dr. J. S. Hardy was called in and examined.

Dr. Hardy withdrew.

Mr. James M'Donald, Corporation labourer, was called in and examined.

Mr. M'Donald withdrew.

The Commission adjourned *sine die*.

FRIDAY, APRIL 20, 1888.

The Commission met at 2.15 P.M.

Present—Mr. W. T. H. Brown, Mr. Gill, Mr. Lewis, and Mr. Dobbie.

In the absence of the Chairman, Mr. Dobbie was voted to the Chair.

The Minutes of the last meeting were read and confirmed.

Resolved, That the Secretary be directed to write the Chief Secretary in reference to the letter addressed by him to the Hospital Board, which appeared in the *Mercury* on Saturday, 14th inst., and inform him that the Report of the Royal Commission on Charitable Institutions will not recommend any change in the paid Medical Staff at the General Hospital.

The Commission deliberated.

The Commission adjourned *sine die*.

FRIDAY, MAY 11, 1888.

The Commission met at 11.15 A.M.

Present—Mr. Dobbie, Mr. W. T. H. Brown, Mr. Gill, Mr. Belbin, Dr. Huston, and the Hon. H. I. Rooke (Chairman).

The Minutes of the last meeting were read and confirmed.

The preparation of the Draft Report was proceeded with.

The Committee adjourned at 1 P.M. to 11.15 A.M. on Saturday, the 12th May.

SATURDAY, MAY 12, 1888.

The Commission met at 11.15 A.M.

Present—Mr. Dobbie, Mr. Gill, Mr. Belbin, Mr. Lewis, Dr. Huston, Mr. W. T. H. Brown, and the Hon. H. I. Rooke (Chairman).

The Minutes of the last meeting were read and confirmed.

The preparation of the Draft Report was proceeded with.

The Commission adjourned at 1 P.M.

The Commission re-assembled at 2.15 P.M.

Present—Mr. Brown, Mr. Dobbie, Mr. Gill, Mr. Lewis, Dr. Huston, Mr. W. T. H. Brown, and the Hon. H. I. Rooke (Chairman).

The preparation of the Draft Report was resumed and proceeded with.

The Commission adjourned at 4 P.M. until 11.15 A.M. on Tuesday, the 15th instant.

TUESDAY, MAY 15, 1888.

The Commission met at 11.15 A.M.

Present—Mr. W. T. H. Brown, Mr. Gill, Dr. Huston, Mr. Lewis, Mr. Belbin, Mr. Fitzgerald, and the Hon. H. I. Rooke (Chairman).

The Minutes of the last meeting were read and confirmed.

The preparation of the Draft Report was proceeded with.

The Commission adjourned at 1 P.M.

The Commission re-assembled at 1.30 P.M.

Present—Mr. Brown, Mr. Lewis, Dr. Huston, Mr. Fitzgerald, and the Hon. H. I. Rooke (Chairman).

The preparation of the Draft Report was resumed.

Resolved, That the Report now read be adopted as the Report of the Royal Commission, and forwarded to the Hon. the Premier for presentation to His Excellency the Governor.

Resolved, That the thanks of the Commissioners be accorded to the Chairman for the able manner in which he has conducted the proceedings.

Resolved, That the Commissioners place on record their appreciation of the manner in which Mr. H. T. Maning has discharged the duties devolving upon him as Secretary to the Royal Commission on the Charitable Institutions of Tasmania.

Resolved, That a gratuity of one guinea per sitting be paid the Secretary.

Instructions were given to the Secretary to close up the affairs of the Commission and submit them to the Chairman.

The Commission adjourned *sine die*.

R E P O R T.

*To His Excellency SIR ROBERT GEORGE CROOKSHANK HAMILTON,
Knight Commander of the Most Honorable Order of the Bath,
Governor and Commander-in-Chief in and over the Colony of
Tasmania and its Dependencies.*

MAY IT PLEASE YOUR EXCELLENCY.

IN conformity with the instructions conveyed by the Instrument whereby our appointment was made, we, the Members of the Royal Commission appointed to make inquiry into and to report upon the present condition and the management of the Charitable Institutions of Tasmania, have the honor to report to you the result of our enquiries, and to recommend such alterations as will, in our opinion, increase the efficiency of these Institutions.

IN the course of the inquiry, the various Institutions were carefully inspected, and where necessary exhaustive evidence taken; and after mature consideration, we have the honour to submit to Your Excellency the following Reports:—

I.—CHARITABLE GRANTS.

1. OUT-DOOR RELIEF.

All out-door relief in the shape of charitable allowances, funeral expenses, transfers, and medical attendance, throughout the Colony, except Hobart, is under the control of the Administrator of Charitable Grants. In Hobart the out-door relief is in the hands of the Benevolent Society, the Treasurer paying over to the Chairman a sum, estimated last year at £827 17s. 9d., for the payment of demands made upon him. As far as the funds under the control of the Administrator are concerned, they appear to be carefully and economically distributed.

It is surprising to find that so small a sum is ordinarily recovered from the relatives of the recipients of charitable grants. Mr. O'Boyle (question 31) states that in 1886 the sum of £33 9s. 5d. only was repaid to the Government, and then after much trouble to get that sum. This being the case, we strongly urge that the suggestion made by Mr. O'Boyle in his Report for 1882 (Parl. Paper No. 10, 1883), and in his reply to question 15, should be given effect to, by altering the law so as to enable him to at once summon the relatives of recipients of relief to show cause why they should not contribute towards their support, instead of, as at present, giving relief first and trying to recover the money afterwards; and that further power should be given to the Government to recover any expenses in connection with funerals and transport.

IN Hobart, as in Launceston, all cases for medical treatment should be attended at the Hospital as in-patients or as out-patients, according to the nature of the case, as far as such a course is possible; and, except where absolutely necessary, the treatment of such cases at their own homes should be discouraged.

Charitable grants should be made, as far as practicable, in the form of rations, and as little money as possible paid directly into the recipient's hands. When it is necessary that rent should be paid on behalf of any applicant for relief, such rent should be paid direct to the landlord.

2. BENEVOLENT SOCIETY, HOBART.

The Chairman and the Executive Committee of the Hobart Benevolent Society have the disposal of the out-door relief in Hobart, without any Government control. In 1886 the amount expended in this way was £1270. A Government allowance of £100 a year is made for the performance of this duty, also a further allowance of £180 a year is made for an Enquiring Officer, whose services are entirely at the disposal of the Society. The Society has further power to give certificates to paupers recommending their admission to the New Town Charitable Institution, and upon the receipt of such certificates the Administrator for Charitable Grants, without further enquiry, issues the necessary authority for admission; another power vested in the hands of the Society is that of giving orders to the sick, enabling them to be treated as out-patients at the General Hospital: for his trouble in investigating these cases the Registrar of the Society receives the salary of £52 per annum from the Treasury.

While the care and trouble taken by the Chairman and the Executive Committee in investigating all the cases brought under their notice is worthy of commendation, we suggest that direct Government grants for charitable purposes should be distributed, and admission to Government Institutions granted, under Government control, and by a Government official only.

A great defect of the present system is proved by the gradual decline in charity, as shown by the returns of money raised by the Benevolent Society for its own purposes. In 1866 the sum raised by voluntary subscription amounted to £669 6s. 5d., and in 1886 the sum had fallen to £158 19s. While there is a large fund, and that chiefly public money, available for disposal by a Society like this, the feelings of the charitably disposed are practically unappealed to; and, on the other hand, there will be found people to come forward and demand assistance as a right, rather than as a charity, and deem it no disgrace to urge claims on such a fund. On account of the large amount of money at the disposal of this Society being known throughout the Colony we attribute the fact that a considerable number of persons come to Hobart from all parts to participate in its distribution.

In recommending that the disposal of the Government grant for out-door relief in Hobart should be taken from the hands of the Society and administered by a Government official, the possibility that persons might receive aid both from the Government and from the Society has not been overlooked; if the books containing lists of recipients of Government aid and the Society's private funds, and all information gained about the paupers, were made mutually available, there would be little danger of anyone being in receipt of relief from both sources. The Launceston Society adequately guards against imposition.

The question whether relief should be given in the form of rations or money payments has been considered, and the conclusion arrived at that no money payments should be made, except in the case of paupers living in the country districts, and then only when unavoidable. The system of local tenders adopted by the Benevolent Society in Launceston is evidently a good one, and its adoption in Hobart would obviate the necessity of renting a room for the distribution of rations, prevent any waste, and cause the recipients of public charity to become more widely known to those who have to contribute towards their support. At the end of each quarter the tradesmen could make up their accounts, accompanied with the orders as vouchers. The Chairman of the Benevolent Society (the Rev. J. W. Simmons) states (question 141) that the receipt of rations is looked upon as discreditable, and (question 127) that claimants for relief have been known to simply refuse to accept provisions; and if, by adopting the course suggested, wider publicity were given to the fact that they were in receipt of rations this would tend to urge those who would otherwise claim money assistance to endeavour to support themselves rather than go through a course which they look upon as humiliating. In addition to the saving of rent the official at present largely employed in attending to the issue of rations would be left free to perform other duties more properly belonging to those of Enquiring Officers, and ultimately his duties might be amalgamated with those of Enquiring Officer on boarded-out children. All money payments for rent should be made direct to the landlord, and should not be allowed to pass through the hands of the recipient of the relief.

The creation of a Board to assist the Administrator of Charitable Grants in the disposal of Government out-door relief would be an improvement.

If it should be found that the funds of this Society, with addition of the Government subsidy of £1 for every £1 voluntarily subscribed, are insufficient to meet the claims made upon them, we would suggest that a lump sum be annually contributed from the General Revenue, as is done in the case of the Launceston Society. In this way sufficient funds would be in their hands, and at the same time the necessity for private charity would not be destroyed.

3. LAUNCESTON BENEVOLENT SOCIETY.

This Institution appears, from the evidence and the Annual Report for 1887, to be working satisfactorily, being free from the defects apparent in the Hobart Society.

It is pleasing to note that no less a sum than £482 7s. 6d. was received by the Society by way of subscriptions and donations, in addition to which the Chairman reports certain gifts of blankets and other goods from the well-wishers of the Society.

It is not considered necessary to make any recommendation with regard to this Society.

4. BOARDING-OUT SYSTEM.

The system of placing children in the care of foster-parents for education and maintenance was adopted after the abolition of the Queen's Orphan Schools, and has engaged careful attention.

It was decided to make an unannounced visit to some of those persons to whom the care of the children was entrusted, and this decision was carried into effect on 2nd February last. On that day five dwellings were visited; and it was found that the children inspected were clean and well cared for, the foster-parents evidently taking an interest in their charges. Education was an object of special care, and attendance at the State School rigidly enforced, such attendance being ensured by withholding payment for maintenance until the production of a certificate of $3\frac{1}{2}$ days' attendance per week from the State School teacher. The number of children placed in the care of one individual was found to vary from one to seven. Except under exceptional circumstances, it is considered that the maximum number should be reduced to four, in order to ensure the careful nurture of the children in houses frequently of a small size and defective ventilation. From the evidence of the Inspecting Officer, Mr. George Judge (questions 73-75), it appears that many children are brought in from the country to be boarded out in the city, and he states this is occasioned by the difficulty of obtaining foster-parents in the country; also, that should they be boarded out in the country there would be a difficulty in the authorities seeing that they were well cared for and that their school attendance was regular. Could the first difficulty be overcome, as it might be, the supervision of the children might well be placed in the hands of the Municipal and Police authorities in which they reside, while they would materially benefit by the substitution of country air and freedom for the vitiated atmosphere and restraint of the city, as well as by acquiring a knowledge of the rural avocations which would serve them in after life; their attendance at school could be secured in the same manner as is adopted in town.

From evidence adduced the system appears to have so far worked well and economically, consequently no suggestions for its improvement are made, except in that of every possible endeavour being made to obtain foster-parents in the country districts, and to obtain the consent of Municipal and Police authorities to exercise supervision over their treatment.

It appears from Mr. O'Boyle's evidence that care is taken to ensure, where possible, the apprenticeship of children to a pursuit which accords with their tastes, and that the system has turned out well, troubles having arisen with but few of the children.

II.—INDUSTRIAL SCHOOLS.

5. BOYS' HOME, HOBART.

The building, on the whole, seems fairly well suited to the purpose for which it is used, though some attempt should be made to improve the ventilation of the dormitories, which is not what it should be. The boys, of whom there were 30, appeared all healthy and happy, and evidently well cared for and fed, the latter part being evidenced not only from their appearance, but from the entries in the master's diary as to their daily fare. The whole of the work incident to the establishment is performed by the lads themselves, even to mending their own clothes. The dormitories in the main building were fairly satisfactory, but overcrowded. A new wing is about to be added to the school,—an improvement urgently needed, as at the present time some of the boys sleep in a detached outhouse above the laundry, there being no room for them elsewhere. The yards and outbuildings show want of attention as to order and repair. The boys from this school, where practicable, should be sent to the Government farm for instruction in all branches of farming, the distance between the two establishments being so trifling that arrangements could easily be made for their daily safe conduct to and fro, and their labour would thus be employed with advantage to themselves and to the Government. Excepting in regard to the few suggestions offered above, the institution and its management is in all respects satisfactory.

6. GIRLS' INDUSTRIAL SCHOOL, HOBART.

On the date of our visit to this Institution, 3rd February, 1888, there were 39 inmates, all of whom were seen at their ordinary pursuits. The management and condition of this establishment are in every detail all that could be desired, reflecting credit on the Matron and those ladies who, as Members of the Visiting Committee, devote a large portion of their time to the supervision and advancement of the school.

7. GIRLS' INDUSTRIAL SCHOOL, LAUNCESTON.

As in the case of the Hobart Industrial School, the management of the Institution met with approval. The children were clean, healthy, and well clad, the apartments, offices, and yards all bearing evidence of careful attention; but more sleeping accommodation should be provided, or the number of children decreased, the dormitories being much overcrowded.

From the evidence of the Matron, Miss Baird, it appears that she considers that it would be beneficial for the children under the age of 14 years to be sent to the State School, and that great relief would be afforded her if that course were adopted. We recommend this suggestion to the favourable consideration of the Minister of Education.

It is in evidence that girls who have been convicted of petty offences have been then placed in the school by the Police Magistrate's order, thus, from the lack of classification, subjecting the other girls to the risk of moral contamination. We are quite in accord with the Matron's wish that girls of the criminal class be not admitted, except those of a tender age, say up to 10 years, who could exercise little influence for evil in the school. With regard to older girls of the criminal class, we refer to suggestions made hereafter under the Girls' Training School, Hobart.

An increased capitation grant should be allowed by Government to the Institutions for the education and training of Girls, much good work having been done by them.

8. ST. JOSEPH'S ORPHANAGE.

The number of inmates at the time of your Commissioners' inspection was 44, the institution being taxed to its fullest powers. The appearance of the girls left a most favourable impression. Cleanliness pervaded the whole establishment,—bedrooms, refectory, lavatories, and yards being in good order.

Additional space is needed to meet the many claims for admission, the reverend Sisters on many occasions having to relinquish their own sleeping apartments to the little children who demand their aid and sympathy. In addition to a careful training in all those branches of household work which would fit them for domestic service, the girls are educated by the ladies who preside over the establishment. The children are also instructed in dairy work, several cows being maintained in connection with the Orphanage. With the exception of the lack of space, a subject which is without the scope of this enquiry, the general management of the Orphanage is in all respects creditable.

III.—TRAINING SCHOOLS.

9. BOYS' TRAINING SCHOOLS, CASCADES.

This establishment was opened in 1884, and then placed under the care of the present Superintendent, Mr. James Longmore. It was called into existence by the difficulty magistrates experienced in dealing with juvenile offenders, knowing as they did that any trivial infraction of the law would often result in a term of imprisonment in gaol, whence the boy, from the companionship and example of older and hardened criminals, would emerge more vicious than when admitted.

At the time of your Commissioners' visit there were 38 boys in the school, their ages ranging from 10 to 16 years. To quote the words of the Secretary, Mr. J. B. Mather, "the school is governed by the law of kindness,—the boys are treated as a family, and every liberty is given them which is suitable,"—a theory which, from a personal inspection of the establishment, the boys themselves, and an examination of those competent to form an opinion, has undoubtedly been carried into practice. The healthy appearance, good manner, and cleanliness of the lads assured us that the school does now, and will to a greater extent in the future, prove a boon to the Colony, by training and turning out useful honest citizens from a class which, if unrescued and untaught, would certainly occasion additional charges on the expenditure in our penal establishments.

The farm attached to the school consists of 100 acres, 12 of which are well cultivated, the labour being entirely supplied by the lads themselves and their workmasters. The farm and outbuildings thereon are the picture of neatness, the garden fully cropped and well tilled, the Superintendent stating that he was indebted to the Manager of the Government Farm for information as to the farming operations. In the school itself the greatest care has been taken to divest it of every attribute suggestive of a prison,—an effort which has been successful to a degree. The dormitories were well arranged, and, with bedding contained therein, comfortable and clean, and the bathrooms, school-room, and recreation ground well suited for the wants of the Institution.

While the education of the boys is well attended to, steps are taken to teach them an occupation which will enable them to leave the school well prepared to engage in the battle of life. For this purpose practical carpenters, a gardener, and a farmer have been engaged for the instruction of the boys. Though not in accord with the evidence of the Superintendent, we are of opinion that it would be advisable in some instances to send boys to the Government Farm for instruction in farming on a more extended scale than that which can be carried on at their own school. Provision doubtless could be made for the safe keeping of the boys whilst at the Farm; and when at work they would have the benefit of the practical supervision and instruction of the Manager of the Farm.

In many instances the good work done in this Institution is nullified by the selfish conduct of parents, who, on the expiration of their children's sentences (at which time the control of the Managers of the Reformatory ceases), induce them to leave the employment in which they have been placed, claim the wages which have been earned during their term of servitude, and expend them for their own selfish ends, leaving the boys again open to all the

temptations incident to their penniless position. In Victoria this evil is guarded against by an Act which makes boys placed in similar Institutions wards of the Managers until the age of 21, thus freeing them from the control of vicious relatives until they are capable of exercising a responsible judgment as to their future actions.

The system of licensing out the boys to employers who can provide them with labour suited to their mental and physical calibre, and whose character warrants the Managers in entrusting their charges to their care, has proved satisfactory. The Superintendent, in his Report for 1887, states that 24 boys have been licensed during the year, and on the whole have done well, several satisfactory letters having been received from gentlemen who have employed them. Under this system (due enquiry having been made) the lads are licensed to their employers at first for a term of three months, after which, if all is satisfactory, their engagement is continued until the end of their sentence, the Managers and the Secretary making arrangements as to the amount of wages to be paid. Each lad on being licensed is provided with a good outfit of clothes, thus precluding the necessity for outlay in that direction for some time. Wages are forwarded monthly to the Secretary, who places them in the Savings' Bank to the credit of the boys earning them. The boys whilst licensed out are not lost sight of by the Managers, letters being frequently sent to the masters and the boys themselves asking for tidings as to their welfare. As an additional precaution, the Managers should induce the police in country districts to visit and report to them the condition of the lads.

In the Superintendent's last report he deems it needful that something should be done to discourage the practice of absconding. At present, should a boy abscond, the time he is absent from the school is considered part of his sentence. The suggestion, in the same report, that the boy be required to serve two days for every one on which he is unlawfully absent from the school, would, if carried into effect, greatly tend to diminish the evil.

From personal inspection, we are able to give our unqualified approval of the manner in which this institution is conducted, and feel confident that it is a great benefit to those boys whose offences have caused them to be placed within its walls.

10. GIRLS' TRAINING SCHOOL REFORMATORY, HOBART.

In this establishment nothing also was found which would call for censure. The inspection, like others, was made without notice, and the Institution seen in its ordinary working order. The girls, of whom there were nine, were neatly clad and healthy, their ages varying from 15 to 18.

The management is firm and economical, and almost self-supporting. Of an annual expenditure of £400 15s. for the year 1887, no less a sum than £282 4s. 1d. was earned by the girls themselves, being proceeds of washing done at the Reformatory. The Government grant to the establishment during the same year was only £141 12s. 2d.

Some steps should be taken to alter the forbidding aspect of the interior of this building. It was originally a military prison, and still presents all the external and internal evidence of its former use. The girls are nightly locked in the old military cells, in the same manner as that in which criminals in gaol are dealt with. This is not as it should be. The inmates of the institution are not there solely for punishment, but, as the name of the establishment denotes, to be reformed; and surely this end would be sooner attained if the building in which they must spend their period of detention were made as much as possible like the home they will inhabit when their freedom is regained. An improved *morale* would be encouraged by allowing the girls more frequent access to the outer world, should their behaviour be of a nature to warrant it. Similar liberty has been given to deserving boys in the Boys' Training School, with satisfactory results.

It is a matter of regret that the Hobart Reformatory, which, at the time of inspection, was found but half tenanted, is not utilised for the reception of girls of the criminal class from Launceston. Mr. Alfred Jones, in his evidence (question 1947), says "that many girls are not sentenced, because magistrates will not send them to gaol." With an establishment such as the Reformatory in existence in the capital, it is a matter of the greatest surprise that Northern magistrates should allow young girls the opportunity of plunging deeper into crime unchecked. Room can be found for 16 girls in the institution, with no additional expenditure for supervision.

IV.—HOSPITALS FOR THE INSANE.

11. HOSPITAL FOR INSANE, NEW NORFOLK.

The most noticeable defect in this Institution is the exceedingly cramped space it occupies in proportion to the number of inmates it contains. This defect has often been noticed before, (e.g., by the Royal Commission on the state of Lunatic Asylums, 1883; the Specialists, Drs. Manning, Paterson, and Dick, in 1884; and the Official Visitors, in their Interim and Annual

Report, 1886.) It may be taken for granted that it has been finally decided to continue the Hospital for the Insane at New Norfolk: we therefore join with other Commissioners, with the Specialists, and with the Official Visitors, in urging on the Government the absolute necessity of at once taking the necessary steps to secure the land adjoining. We endorse the recommendation, No. 2, of the Royal Commission of 1883, with regard to the purchase of land; the advantages that will be gained completely outweigh any considerations of cost or expense, and there will be room for the new buildings which are so imperatively needed. Anything more depressing than the back yard it is difficult to picture; it is dreary to a degree, and must militate against the recovery of the unfortunates who are placed there. We would be glad to see this portion of the Establishment entirely rased and new buildings erected with better accommodation, more light and air, and recent appliances. That more ground is required is shown by the fact that in order to provide accommodation for the more acute male cases, it is proposed to erect a building on the present grounds already overbuilt, and exactly in front of the cottage occupied by the male paying patients, so shutting off completely a very pretty view obtainable from their verandah. We strongly deprecate the erection of the proposed building on this site.

By the acquisition of more land in the vicinity of the Hospital, scope for employing the patients in healthy recreation could be gained; there would be room for gardening and vegetable-growing on an extended scale—this, all experts state, is the best employment for patients suffering from mental derangement; it would be profitable, too, as the vegetables could be supplied to the patients, thus forming a much needed change in their daily diet. A ground for cricket and other games could also be found within the boundaries of the Hospital. Lastly, the great advantage of purchasing the adjoining land, and closing at all events Burnett-street and Grey-street, would be the seclusion that would be obtained for the inmates. Very serious complaints are made that the idea of an asylum, that is, a place for the seclusion of the patients, is now entirely lost on account of its closeness to the public roads; it is in evidence that persons often climb on the walls to look over, which is a source of great annoyance, and owing to this the more demonstrative female patients have frequently to be sent in from the yard (question 497.) The increase in the number of visitors to New Norfolk consequent on the opening of the Derwent Valley Railway will tend to further augment this crying evil, which demands instant attention, and we trust that during the coming Session the Legislature will grant the necessary powers to close Grey and Burnett-streets, and provide funds for the purchase of the land necessary.

The urgent necessity for purchasing and erecting a steam laundry and steam saw-mill, and proper apparatus for supplying hot water all over the male division demands immediate attention. Dr. Macfarlane states that at present (question 472) they have great difficulty in providing clean clothing for the patients, and two night attendants have to keep up big fires to air the sheets; and Dr. Crampton states (question 556) that a large amount of washing is left undone in consequence of there not being a steam laundry, and that he is told that some of the blankets have not been washed for years owing to the want of washing accommodation. A steam saw-mill would do away with the present wood-yard, and set free a large number of patients from the depressing work of wood-cutting and sawing for the more healthy and profitable occupation of farm and garden culture. A central kitchen, with steam cooking apparatus, should be erected in place of the five kitchens at present in the establishment, and this could be managed by one cook instead of the three now employed. The one large boiler would serve the purpose of providing steam for laundry, kitchen, and saw-mill, and at the same time would supply hot water in the male division.

The necessity for proper accommodation for the attendants is very great; this is extremely meagre and unsuitable on the male side, and on the female side the attendants have to use the kitchen for a dining and sitting-room, and their sleeping accommodation is not what it should be.

The absence of proper administrative buildings is very marked; both the medical men in charge live outside the walls of the institution. There is a need for a waiting-room, so that visitors should not, as now, upon entering the gates be immediately thrown amongst the patients.

More stringent rules should be made with regard to visitors to the institution, especially casual visitors, who now can go any day, and at any hour of the day, and occupy the time of the attendants to a considerable extent. Two days a week should amply suffice, with discretionary power given to the medical officers to admit friends of patients who have come from long distances.

The grounds generally should be made more attractive by planting ornamental trees, shrubs, and flowers. This would render the Asylum more pleasant as an abode, and give employment to the patients now engaged in the wood-yard. The back yard especially might be vastly improved and made more cheerful by removing some of the buildings, and laying part of the space out in gardens.

During our visit we saw a very large quantity of disused clothing, boots, and bedding, the accumulation of over four years. The custom of allowing such articles to be about the building decomposing year after year is very offensive, and must have a bad effect from a sanitary point of

view. On enquiry we learnt that these articles have to be condemned by the Colonial Storekeeper before they are allowed to be destroyed. The length of time that elapses between each visit paid by the Storekeeper allows the accumulation of a large amount of rubbish. Unless arrangements could be made for that officer to visit the Asylum at least once every three months to examine articles proposed to be condemned, we would advise that the Official Visitors should be empowered to condemn them.

It is highly desirable that the interior of the wards should be made more cheerful. To effect this more pictures are required; more newspapers and illustrated papers would contribute to the entertainment of the patients. Towards this end, and to allow of more frequent picnics, drives, concerts, and other forms of recreation, for which no provision is made, we suggest that a sum of money (say, £100) be placed on the annual Estimates to be handed over to the Medical Superintendent for these purposes. It is suggested that a chapel should be built for religious services, and it was pointed out that this would have a beneficial influence on the patients. While endorsing this opinion, we think that the other matters which we have drawn attention to above should have first consideration.

The Medical Superintendent states that the recommendations of the Official Visitors as to the supply of appliances for extinguishing fire have been attended to, but that a higher pressure of water is still needed to enable them to throw water over the whole of the buildings, having in view the horrors that would ensue should a fire take place in an establishment of this class. We recommend that steps be at once taken to ensure the needed pressure.

12. CASCADES HOSPITAL FOR THE INSANE.

The buildings and the site on which they are erected have been the cause of much comment in the past, having been originally erected and used for female prisoners, and it has often been proposed to remove all the inmates to New Norfolk. To carry out this proposal would cost, as shown in evidence, at least £15,000 for the additional accommodation that would be necessary. The inmates are almost entirely the Imperial prisoners who were brought from Port Arthur in 1877, and no hope can be entertained of these men being restored to their senses, even under the most favourable conditions. We agree with Dr. Smart (question 426) that, allowing 20 years as the probable time when the inmates of the Cascades Asylum will have ceased to exist, it would be unwise to incur so great an expenditure for so short a time. Steps might be taken to make provision at New Norfolk for the retention of any local criminal lunatics and men confined during Her Majesty's pleasure, in a building completely separated from the present Hospital for Insane, before the Cascades Asylum ceases to be used for its present purposes, which it will presumably be when the last survivor of the Imperial prisoners dies. Immediate provision should be made to provide suitable accommodation at New Norfolk for very violent and dangerous cases; some of such cases being difficult to deal with there on account of the want of single room accommodation, are now transferred to the Cascades, thus tending to continue the use of this building for a purpose it was never designed for and can never be made suitable for.

The staff that is now maintained at the Asylum has been the subject of much serious consideration, and, after much deliberation, the conclusion has been arrived at that it might be reduced without in any way impairing efficiency. The medical testimony as to the necessity for having a medical man as Superintendent of the Asylum is divided, some of the witnesses called thinking that a daily visit from a Hobart medical man, with whom the institution would be at all times in telephonic communication, would suffice for all requirements. But the weight of evidence inclined to the view that it would be undesirable to leave this institution without a medical man available at all times in the day. We have adopted the latter view, and, while doing so, consider that many of the duties now performed by the Head Attendant might be more advantageously performed by the Surgeon-Superintendent. He should be made entirely responsible for the internal arrangement and management of the Asylum as well as attending to his professional duties in connection with the Institution; thus all orders should be given to the attendants direct instead of through the medium of the Head Attendant. The Surgeon-Superintendent should, by making frequent visits through the establishment, see that every order is carried out, and that every detail of duty is properly performed. He should also pay occasional visits at the meal hours to see that the food is properly cooked and served; and also unexpectedly at night time to see that the attendants are duly performing their duties. Fixed hours should be laid down in the rules at which the Superintendent should be at liberty to leave the Institution, and arrangements should be made for the immediate attendance of a Hobart doctor should any emergency arise during the hours fixed for his absence. Having regard to the small size of this Institution, we consider that all the above-named duties should be performed by the Surgeon-Superintendent, and that the services of the Head Attendant could be dispensed with. If this course were adopted, it might be found advisable to have a third under-attendant, who should perform the light duties of storekeeper and clerk, and could also take his share of the work in the yards.

It is of the greatest importance that a revised set of rules be at once published. The existing rules were drawn up in 1877, and have since been altered only in matters of detail. One of the under-attendants states (question 307) he had not seen a copy of these rules during the 14 months that he had been in the Institution. Another under-attendant thinks the rules were destroyed two or three years ago (question 399.) An attendant states he had not seen the written rules for some months. It is of great importance that everyone connected with an Institution like this should have his duties clearly defined and made known to him. If this suggestion be adopted the duties we have assigned to the Surgeon-Superintendent should be detailed, and the daily and annual leave of absence to be enjoyed by each official should be set forth.

A stop-clock, similar to those in use at New Norfolk, should be supplied to this Institution to insure the proper performance of night duties.

There should be a strict prohibition against any employment of the attendants for work not strictly connected with the Institution.

More use should be made of the recreation ground by taking all the patients able to go there for some hours every day provided that the weather permits.

The present indiscriminate admission of casual visitors should be checked immediately, especially in large numbers, as it is injurious to the patients, and takes the attendants away from their proper duties. We therefore recommend that visitors should only be admitted on the order of the Chief Secretary or Surgeon-Superintendent, and then, except in the case of relatives or connexions of patients, on stated days, at fixed hours, and in small numbers.

We were surprised to learn from the evidence (questions 213 and 214) that the Surgeon-Superintendent has been in the habit of keeping animals, the produce of which has been sold to the officials of the establishment. We strongly recommend that this practice be immediately discontinued.

We found six paupers engaged in light work within the Asylum; this arrangement meets with our approval, as it provides suitable employment for this class of men, at small cost to the Government. We hope that further assistance, when needed, will be drawn from this same source. The general appearance of the patients left the impression that hardly sufficient attention was paid by the authorities to the cleanliness of their persons and of their clothes.

Attention was drawn to the fact of some patients receiving indulgences not allowed to others. We are of opinion that in no case should the ordinary discipline of the institution be departed from.

The issue of medical comforts in this establishment should be made on a more liberal scale, and the quality of the spirits and wine issued should be greatly improved.

We conclude our remarks on this Institution and the New Norfolk Hospital for Insane by adding our testimony to the useful work being carried on by the Official Visitors.

V.—HOSPITALS.

13. GENERAL HOSPITAL, HOBART.

Very considerable satisfaction was experienced in going over this Hospital. Everything within the building was found in perfect order, and the general management appeared to leave little that could be desired. A few improvements in matters of detail connected with the Institution could be made with advantage, and these are indicated as follows.

With regard to the treatment of patients, it was thought advisable to call witnesses who had been in the Hospital, and their testimony confirmed the favourable impressions we formed during our inspection. Mr. Charles Harbottle, late Mayor of Hobart, who was taken into the Hospital after the great railway accident in 1886, and remained there 27 days, during which time he was treated as other patients, stated (question 3367), "that no words that any person can use could speak too highly of the Institution. The attendance of both nurses and doctors was good; the food and anything else required did not require to be asked for—the attendants seemed intuitively to guess what was required; nothing could be cleaner, not only in his own bed but also in the beds of the other patients; the cooking was very good, and the food of good quality, and, generally speaking, put before the patients in such a way that a fastidious person could not find fault." Mr. C. H. Grant, the Manager of the Tasmanian Main Line Railway, who was being treated at the Hospital at the time of our visit, expresses himself in somewhat similar terms. He stated (question 3207),—"that he was in every way satisfied with his treatment generally; he was thoroughly satisfied with the attendance and food; everything seemed to him to be as comfortable as could be desired, not only for himself but for all other persons; the food was admirably cooked and well served; he did not believe the statement that people were not well treated, more especially in regard to the food and beef-tea; he had the same beef-tea as the other patients, and it was

very good; the linen was clean, and frequently changed, but that he had seen stains on it from preparations such as iodine and nitrate of silver, which ignorant people might think arose from other causes (question 3126); the system of supervision was very good, and the result was that the patients were well looked after." Not content with this evidence, strong as it is, we picked at random upon one of the patients, by name Patrick Kennar, who was wandering about in the Hospital grounds, and without previous notice summoned him. His evidence went entirely to corroborate the two previous witnesses. "He had then been in the Hospital for over a fortnight, being under treatment for consumption. He stated that he had been well treated; nothing could be better than the attendance of the nurses; the food was good; he got a clean shirt every week, and the bed linen was frequently changed; the beef-tea was good; he had nothing to complain of, nor did the other patients with whom he mixed complain at all in his hearing, but all seemed to be satisfied." We feel convinced that any complaints raised against the cleanliness or general comfort of the Hospital are wholly groundless; and we are not forgetful that such complaints are sometimes raised by persons who come from comfortless homes, and who ought to feel grateful that they have such comfort and luxury as is afforded them in this Institution.

Of late there have been several charges of malpractice and ill-treatment with regard to Hospital patients levelled against the paid and honorary staff. One of these charges has been made the subject of enquiry in the Supreme Court, and another by a Board appointed for the purpose, with the result in both cases that neither were substantiated. Into these cases we did not deem it necessary to make any further investigation, being quite satisfied with the verdicts given. With regard to the other charges of malpractice and ill-treatment, we found, after full investigation, that they were without foundation; and we give it as our undoubted opinion that the staff are in every way thoroughly competent to have charge of this Institution, and are deserving of full confidence at the hands of the public. Especial praise is due to them for the admirable way they conducted the Hospital under the severe and trying strain caused last year by the epidemic of typhoid fever. We recommend that a book be kept, at all times available for the patients, and that each patient before leaving the Hospital be invited to write in it any complaints they may desire to make of their treatment during their sojourn at the Hospital. If this be adopted, every complaint will become the immediate subject of investigation, instead of being left until the circumstances of the case are almost forgotten, and fewer fancied grievances will be brought up in public to the annoyance of those connected with the management, and to the injury of the Institution.

The buildings and grounds are capable of improvement, in several directions, at no great cost. The old disused buildings about the grounds should be at once pulled down and removed; the vacant pieces of ground on Campbell-street and Argyle-street should have the rubbish removed therefrom, and be enclosed with a suitable fence, and then properly laid out as a garden. Better store accommodation is required, and the kitchen should be brought up to modern requirements. A separate ward is needed for male patients suffering from *delirium tremens*, the present quarters being very bad. The Nurses' Home, though very comfortable, does not provide adequate sleeping accommodation for all the staff. The bath-room and closets in the old hospital require improving; and there should be a speaking-tube or telephonic communication between the wards and the Nurses' Home.

The questions asked concerning the positions occupied by the House Surgeon and the Honorary Medical Officers respectively evoked answers of a very divergent nature, and we found it difficult to arrive at a satisfactory solution of this question. At the present time the House Surgeon has no patients allotted entirely to his own care: he has merely to carry out the instructions of the Honorary Medical Staff, and act in their absence or in case of emergency. This, it is said, is a bar to any well qualified man from holding the office for any very lengthened period. On the other hand, we would be sorry to hand over such a large Institution as this, with its enormous responsibility, to the sole care of any medical man; and it would be difficult to find any one with the necessary qualification for such a responsible charge without very largely increasing the emoluments at present provided for the House Surgeon. It was suggested by Dr. Thompson (questions 1572, 1573) that the House Surgeon should have a certain number of beds entirely under his own care, and should take his turn with the Honorary Staff among the patients admitted. Against this it was urged that if the present limited number of patients were further subdivided the doctors who now give up so much of their time to the poor without remuneration would have so little to do that they would cease to take as much interest in the Hospital as they at present evince. After full consideration we have arrived at the conclusion that it is undesirable to make any change in the existing system.

It has often been suggested that provision should be made at the General Hospital for the admission of a wealthier class of patients, who should pay for their medical attendance as well as for their maintenance; this suggestion was again repeated in the evidence taken during our investigation; but we are unable to endorse it. It would, in our opinion, set this Hospital in opposition to the medical profession generally, and the State would doubtless, before long, be deprived of the valuable services of the Honorary Medical Staff. This would be a serious

evil, for the care of the Hospital could not safely be handed over entirely to the paid medical staff, and, if it were, no one could be found to undertake such onerous duties as would have to be performed without a very considerable increase of salary and consequent expense to the Colony. There is a further and more weighty argument against adopting such a course. The General Hospital is essentially a charitable institution supported by Government funds, assisted by the gratuitous services of the Honorary Staff, and intended to provide for the care and treatment of such of the citizens as are unable to provide for themselves, and in no way designed to provide for those who can afford to pay. Provision such as this is usually afforded in a private hospital supported by voluntary contributions; and the tax-payers have done their duty when they have made provision for those in indigent circumstances, and should not be called upon to provide for the wealthier classes. The growing practice of allowing those who can afford to be treated in their own homes to enter this Hospital, should, in our opinion, be discouraged in every possible way, except in the cases of accident and infectious disease.

From Mr. Morris's evidence we learn that over fifty per cent. of the fees due by the patients were lost to the Institution, and that a commission of ten per cent. was paid on those collected. It also transpired that patients are allowed to leave the Hospital without any payment for their maintenance being demanded; the accounts due being afterwards placed in the hands of a collector, entailing, as before stated, a loss of ten per cent. In Launceston the commission paid to the Collector is only five per cent., the Secretary collecting, where possible, the fees due before the patients leave the Hospital. We would recommend that the system in vogue in Launceston be adopted in Hobart, as it is necessary that some change should be made in a system which entails such serious loss to the Institution.

Another suggestion was made, that every medical man throughout the Southern part of the Colony should be allowed, after sending a patient to the Hospital, to treat him there. We fail to see the advantages that would accrue from the adoption of this course, while the evils are obvious. If all medical men, without discrimination, were allowed to treat their own patients in the Hospital, control over the conduct of the Medical Staff would cease; the duties of the Hospital would be divided among so many doctors, and there would be so few patients to be treated by each of them, that they would take less interest in the patients confided to their care, and devote less time to the institution generally than is at present done by the Honorary Staff; and further, we think that if the medical men of the community are anxious to see such an idea carried into force, it would be more fitting that they should provide a private hospital for their own convenience rather than ask the Government to supply the extensive accommodation required to meet their own private wants.

The composition of the Hospital Board formed the subject of much anxious thought. By some it is considered that the Board, consisting as it does of 17 members, is too large and unwieldy; but to us it appears likely that a numerous Board is probably representative of many sections in the community, and permits a wider selection in the formation of the various sub-committees appointed from among the members of the Board. It has sometimes been suggested that the Board should be wholly or in part elected by the ratepayers of the Southern half of the Colony. We have heard of no plan, nor can we conceive one, that would provide adequately for the conduct of such an election. It is not stated whether every ratepayer should have a similar right of voting, or whether the voting should be in proportion to the amount contributed by each to the general taxation. It has been suggested as a possible means of popularising the Institution and economising the funds thereof, that a system of private subscription might be inaugurated, the subscribers having a voice in the election of the management. We recommend this suggestion to the careful attention of the Government. Considerable difference of opinion exists as to the relative value of elective and nominee boards; but we are unable to suggest any scheme which would render an elective system practicable in this Institution.

The erection of a homœopathic ward next came under our consideration. Upon this point we are divided, and consequently refrain from making any suggestions. With regard to hydropathic treatment, we are of opinion that the erection of a Turkish bath would be attended with beneficial results.

A general revision of Rules seems desirable, and is, we are informed, being proceeded with. The difficulties that occurred in 1886 between the House Surgeon and the Lady Superintendent were, in a large measure, attributable to the absence of rules clearly defining the duties and functions of each official. It should be made impossible for such questions to arise, and this can only be done by a complete code of Rules, making provision to meet every contingency.

It seemed to us that more complete arrangements might be made for the training of students, and encouragement be given to students from the other colonies to attend a course of anatomy at this hospital (question 1877). A more systematic training of nurses should be put in force as soon as the existing strain caused by the prevailing epidemic of typhoid fever is at an end.

The purchase of the property situate in Liverpool and Campbell streets, now in private hands, so as to place the Hospital in possession of the complete block, was brought under our notice; and, as the land can in all likelihood be purchased now for as low a price as in the future, and will hereafter be required for necessary extensions to the buildings and the erection of a proper Nurses' Home, we commend the purchase to the consideration of the Government.

No evidence was forthcoming that would in any way substantiate the charges that from time to time have been publicly levelled against the Management of the Institution, although every facility was offered for its production.

14. LAUNCESTON HOSPITAL.

Although the foundations of the building are reported to be defective, the Hospital, we are pleased to report, was found to be in a condition of perfect order, the management all that could be desired, the nursing and medical staff well trained and effective, the building itself well arranged, well ventilated, in a good position, and adequately provided with appliances.

The system observed in this Hospital with regard to the Medical Officers is unlike that in vogue in any other similar institution of which we have any knowledge. The Surgeon-Superintendent and the Assistant Surgeon divide the charge of patients as they come in between them, and treat them separately, only co-operating when necessary, the former being held responsible for the working of the entire hospital; and the honorary surgeons, four in number, are only called in for consultations, last year only about 12 consultations being held. The advisability of continuing this system, by which so much responsibility is thrown upon two men, and by which the local medical men are deprived of almost all interest in the hospital, is a question that engaged our attention. On the other hand, we had to consider the very excellent manner in which the Hospital is conducted, the well-known confidence felt by the people at large in the management, the ability and zeal of the present Surgeon-Superintendent, and the amicable relations existing between the medical staff and the Hospital Board. We feel that the latter considerations are of such a weighty nature, and no call being made for any change, we do not recommend any alteration in the present system.

It is urgently necessary that a small sum be appropriated annually to enable minor repairs to be immediately effected. Dr. Thompson gave us several instances where serious damage and much inconvenience by the delay of the Public Works Department was caused in repairing broken water pipes, panes of glass, &c.—(question 1592). The extravagance displayed in the erection of the boiler-house, the absence of insulation in the case of hot-water pipes causing the loss of much heat, and the want of proper supervision in the erection of the hydraulic cylinder, were all brought under our attention. We were also informed that the foundations of the hospital are riddled like a rabbit warren, and need an immediate survey (question 1600). These facts we commend to the notice of the Lands and Works Department.

The revision of the Rules requires to be taken in hand at once, as suggested by the Surgeon-Superintendent, and should contain the detailed duties of everyone connected with the Hospital.

The want of proper accommodation for male attendants, who now have to sleep in the wards, was brought under our notice, and requires remedying, as also the necessity of proper accommodation for *delirium tremens* patients, who now have to be treated in the general wards, with serious inconvenience and danger to the other patients. Provision should also be made for the observation at the Hospital of suspected lunatics, who are now taken to the Gaol for that purpose, and there have to associate with ordinary prisoners, and are thus subjected to influences which must have a most prejudicial effect.

It was stated that if the stores were supplied locally instead of as at present from the Colonial Storekeeper, it would result in a saving on the yearly cost, because only what was required would have to be purchased, and thus the risk of loss through ordering more than could be used during the six months, and the troublesome delays caused in the process of sending for stores through the Colonial Storekeeper would be removed, less clerical work would have to be performed, and the present store-room could be utilised for hospital purposes. We submit this suggestion to the consideration of the Government.

15. CAMPBELL TOWN HOSPITAL.

We found this hospital to be an old brick building in very bad repair, the rooms being small and most inconveniently situated; the furniture, dormitories, and bedding all clean, but of the most meagre and primitive description, no spring mattresses being supplied. There is no bath-room, the only available bath being an old plunge, which was filled from the kitchen boiler when hot water was required. There are no instruments or surgical appliances belonging to the hospital, the medical officer in charge having to supply his own.

It is apparent that this hospital should be no longer continued in the present building, and the question arose whether it was necessary to continue a hospital in Campbell Town largely at Government expense, in view of the increased facilities afforded by the railway for reaching the Government hospitals at Launceston and Hobart. Taking into consideration that the hospital had been started 30 years ago by local effort, and had during that time been liberally assisted by the voluntary subscriptions of the inhabitants,—viewing, too, the fact that the recently opened line to Fingal will probably increase the number of patients, who would otherwise be taken to Launceston, and that Campbell Town is well suited by reason of its position and climate for such an institution,—the conclusion was arrived at that it was desirable that Government should continue its support to the hospital.

For a new hospital there is a sum of £2200 available, which should suffice for the erection and equipment of a modern building likely to suffice for the requirements of the locality for many years to come. Though this money has been available for some time, no steps have been taken to expend it, owing, apparently, to the difficulty in deciding upon the most suitable site. We carefully viewed the different sites proposed for the new building, and determined that the block of land at the back of the Post and Telegraph Office, and overlooking the Riccarton estate, is in every way the most desirable and best suited for the purpose. We advise that if the building is not at once proceeded with the Government should withdraw the grant in aid until the erection of the new hospital.

A new Board of Management had been formed shortly before our visit, and was working, as far as we could learn, for the best interests of the hospital. While we deprecate this institution becoming wholly a Government one, yet, considering the large amount of money annually voted for its maintenance,—£200, as compared with £67 raised by voluntary subscription last year,—it is only right that the Government should have some voice in the management, and recommend that at least one member of the Board should be appointed by the Governor in Council to hold office for a term of two years. We also think that the Medical Officer in charge, who is practically an honorary medical officer, seeing that he receives a salary of only £50, out of which he has to provide medicines and surgical appliances, should also be a member of the Board.

A complete set of rules defining clearly the duties and privileges of the Board, the Medical Officer in charge, the Honorary Medical Officers, the Matron, &c. should be prepared forthwith.

16. MOUNT BISCHOFF PROVIDENT HOSPITAL.

This hospital receives a grant of £200 a year from the Government, provided the sum of £150 be raised by subscription. After due consideration we felt they would not be justified in incurring the great expense that a personal visit to Waratah would entail, and nothing came to our knowledge that showed the necessity for summoning witnesses to attend in Hobart to give any evidence on the matter. We therefore have the honour to direct your attention to the seventh Annual Report of the Hospital for the year ending 31st December, 1887, which is now in our hands.

17. HOSPITAL FOR CONTAGIOUS DISEASES, CASCADES.

This establishment was found, at the time of our visit, unoccupied by any patients. The interior of the building and yard was in good order, but the Matron pointed out serious leaks in the ward which is used for the purposes of the Contagious Diseases Act. The kitchen and dormitories, in which there is accommodation for 15 patients, were found to be all that is required for an institution of this class. We noted that no proper bath-room was provided, the only substitute being an ancient hip-bath placed in one of the old cells, and we are of opinion that this want should at once be attended to. We notice that the Contagious Diseases Act lacks provision for the control and discipline of patients when under treatment.

Dr. Coverdale, the Medical Officer of the Institution, states in his Report for the year 1887, that there were 36 admissions to the Hospital, as against 11 in each of the past two years of the operation of the Act; and goes on to say, "That in regarding the number of admissions it would be misleading to suppose that they would approximately indicate the amount of disease said to exist in the metropolis;" and further, that "there is no little difficulty in believing that the greatly reduced numbers of late really mean a corresponding diminution of disorder." Though the operation of the Contagious Diseases Act has doubtless greatly decreased disease, it may be that Dr. Coverdale's surmise as to its prevalence is correct, though it is the opinion of Detective-Sergeants Delaney and Franklin that the town is comparatively clean as far as prostitutes are concerned, but those officials are of opinion that it would tend to the more effective working of the Act if the prostitutes were prevented from obtaining clean certificates from medical men, as the practice has in many instances the effect of rendering the action of the police nugatory, as they can take no further steps on the production of a medical certificate. It frequently happens that diseased girls, on receiving a notice to appear for examination, use certain chemicals which temporarily obliterate all traces of the

disease, and then submit themselves to the examination of a private practitioner, who in good faith gives them clean certificates, which at once exempt them from any further interference on the part of the police. Evidence has also been given to the effect that in some instances diseased girls, on receipt of a summons for examination, have induced healthy friends to submit themselves in their names to the examination of private practitioners, whose certificates have allowed the suspected girls to defy the police and go on their way unexamined and uncured. To meet these evasions of the Act, we submit that the officer appointed by the Governor in Council under the Contagious Diseases Act be empowered to order any suspected prostitute to be detained for immediate examination by some medical man appointed for the purpose, and thus deprive them of any chance of eluding medical supervision and temporary restraint.

18. HOSPITAL FOR CONTAGIOUS DISEASES, LAUNCESTON.

The hospital is situated in a portion of the Launceston Gaol, and at the time of inspection contained two patients. The control is in the hands of a Matron in receipt of a salary of £30 per annum, which we are of opinion is inadequate remuneration for the duties that official has to perform. The condition of the hospital, the rooms, and the appliances, called for an expression of the highest approbation.

19. LYING-IN HOSPITAL, CASCADES.

There was but one inmate at the time of your Commissioners' inspection. The Hospital has two wards, affording accommodation for five cases. These, though sparsely furnished, were clean and in good order, as was the whole of the establishment. The beds were iron ones of the old convict type, quite unsuited for the condition in which the occupants of this Hospital must necessarily be. The scale of diet was considered satisfactory and ample. The kitchen was only in course of construction, and not in working order. We would suggest that suitable beds be provided for the women who are compelled to use this building. In all other respects we find the institution fitted for its purpose.

VI.—CHARITABLE INSTITUTIONS.

20. NEW TOWN CHARITABLE INSTITUTION.

The majority of the inmates of this institution consists of the remnants of a rapidly decreasing class of persons sent to this colony in bygone days, and then often treated in such a manner as to unfit them, when given their freedom, to provide for their declining years, and so to throw them upon the charity of the colony. This class is year by year becoming smaller, and at no very distant date will become extinct. When this time arrives we hope that the resources of the colony will be less heavily taxed to provide a home for persons who now are found in such large numbers in our institutions, for we believe that, though inevitable accident or natural improvidence will prevent our ever being free from those who are unable or neglect to lay by sufficient for their old age, still their own pride will prevent them from becoming a burden upon the more provident members of the community. Our contention that a large factor in the cost of our charitable institutions is attributable to the relics of the convict days of the colony is borne out by the following figures:—In the New Town Charitable Institution the inmates were classified as follows on the 1st May, 1888:—Free by servitude, 504; free to the colony, 122; natives, 46. At the Invalid Dépôt, Launceston, where in the Annual Reports the civil condition is always given—a practice we would like to see adopted in the New Town Charitable Institution for the sake of general information—there were remaining on the 31st December last a total of 160 inmates, who were classified thus:—Free by servitude, 130; free to the colony, 25; natives, 5. The total percentage being—Free by servitude, 82 per cent.; free to the colony, 15 per cent.; natives, 3 per cent.

Such being the case, and as we are of opinion that the resources of the institutions, although fully taxed at the present time, and without any prospect of being immediately relieved, will in the near future have a considerable burden taken from them, we feel compelled to refrain from suggesting any vital changes in the system such as might do much towards improving the condition of the inmates, but at the same time would entail very considerable expense to the colony. From a careful and critical examination of the buildings, and seeing the inmates in their daily routine of life, we consider the New Town Charitable Institution economically managed, and, as far as circumstances admit, provided with all necessary comforts. There are, however, many minor matters to which we deem it our duty to call attention.

The first question to which our attention was called was the necessity for trained female nurses to attend upon the male invalids. The adoption of this course was strongly insisted on by Dr. Barnard, the Medical Officer attending the institution, and by Mr. Seager, the Assistant Superintendent; but after the fullest consideration we have determined not to recommend any change from

the present system, which appears to work fairly well. From the evidence, and from our own observations, the invalids are well cared for, and receive every medical comfort. The class of men in the institution are of such habits that very considerable difficulty would be found in obtaining the services of respectable women to do the work that would be required of them,—in fact, we think it impossible that any woman could be induced to undertake the duties. There would be additional buildings required for their accommodation, and the additional cost for wages, rations, clothing, &c. would not, in our opinion, be justified. The patients in the hospital of the institution are for the most part incurable, and no amount of skilled nursing would be of avail to restore them to health, all the curable cases being sent to the General Hospital, where they get the nursing that is supposed to be wanting in the institution.

The absence of a fitting ward for patients suffering from cancer is an evil which should be remedied without delay. There is one cancer ward, with only three beds. This ward is small, ill-ventilated, and insufficient for the requirements of the institution. In it we found three patients; the smell was most offensive, and the temperature far too high, and no attempt had been made to screen the patients from the rays of a hot sun streaming through the windows. At the time of our visit there were two other patients suffering from this disease occupying the ordinary wards, and mixing with the other inmates,—a course which is much to be deprecated. We therefore recommend that a sufficiently large and properly ventilated ward be at once set apart for this class of patients, and for this class alone. If this were done, we would advise that all cancer patients that are now in or in future should obtain admission into the Invalid Dépôt at Launceston be removed to New Town, and in this way be kept apart from the other patients.

The majority of the wards are not sufficiently ventilated. The inmates, we are told, object to too much air, and close up the windows and openings. We advise that ventilators on the most modern principles, which cannot be closed, and which would not be open to the objection of draught, be introduced. Disinfectants should be more freely used about the wards, and the system in vogue at the Launceston Invalid Dépôt might with advantage be adopted. The introduction of gas to replace kerosene lamps now in use would be a great improvement, in being safer, cleaner, and in the end more economical. The bathing accommodation is insufficient in the hospital wards, and generally is capable of very considerable improvement. One washing-trough that we inspected is certainly of a most primitive nature, and calculated to spread disease when we consider that it is used by all classes of the inmates. It consists of a wooden trough, divided by partitions, and erected round the three sides of a room; the water enters from a tap at one end, and passes from one division to the other through holes left at the bottom of the partitions until it escapes at the opposite end. Thus, if an inmate who washes in the upper level of the trough should happen to suffer from any infectious disease there is a danger of the infection being spread amongst those using the trough at the lower level. In any case the plan is very disgusting, and separate washing-places, wholly disconnected with one another, should be introduced. From the personal appearance of the men, we are of opinion that sufficient care is not taken to enforce habits of cleanliness both in regard to their persons and their clothes.

The admission to this institution is at present in the hands of the Administrator of Charitable Grants as regards applicants from outside Hobart, and practically in the hands of the Hobart Benevolent Society as regards applicants from Hobart. We are informed that two-thirds of the inmates now in the institution have come from Hobart and its suburbs, and, for reasons we stated before, feel averse to a continuance of this dual control. We are of opinion that as this is a Government institution, and maintained out of the General Revenue, it is not right that the privilege of granting admission should be in the hands of a body who are practically irresponsible to Government, and submit that the sole power of granting admission should be in the hands of the Administrator.

Knowing the great benefits that are derived in other institutions, such as the Gaols and the Lunatic Asylums, from the periodical visits and reports of Official Visitors, we recommend that two Official Visitors should be appointed to visit and inspect this institution at intervals not exceeding one month. They should be supplied with forms of reports, such as are in use by the Official Visitors to the Lunatic Asylums, to be filled in and forwarded to the Chief Secretary after each visit. This course would ensure the duties connected with the management being properly performed; would give the public increased confidence in the institution they are called upon to maintain; would be of great assistance to the Ministerial Head of the department; and finally, would be an important record for the information of Members of Parliament should they look into the details of the institution.

Accommodation for the female paupers is provided in a handsome and spacious building to the rear of that occupied by the males. The management, order, and good ventilation of this building left nothing to be desired. The inmates were clean in their persons and clothes, and as cheerful as could be expected of those advanced to extreme old age. We noticed a verandah surrounding the courtyard affording ample shelter from both rain and sun, and are of opinion that this obviates any necessity for the proposed new verandah in the front of the building. We also noticed the presence of some 10 young children among the aged paupers. There were three who

had been admitted on the order of the Administrator of Charitable Grants. The Matron stated that the care of these children was frequently a cause of serious embarrassment to her. As it is an undisputed fact that continued companionship of extreme youth and senility cannot but be injurious to the former, and having at our disposal so many homes wherein these children could be placed and cared for with others of a similar age, we recommend that the practice of admitting children to this institution be at once discontinued.

We find that a young coloured woman with her two children, who arrived from the Cape of Good Hope some nine months ago, in the hope of finding her husband, was then placed in the institution, and has remained there ever since. We do not think the institution is intended for females of this class, or that Government should be called upon to provide for any one without some attempt having first been made to make them either wholly or partially support themselves. In the case we have referred to both the woman and children have apparently become permanent charges on the State.

21. INVALID DEPÔT, LAUNCESTON.

We are able to record our unqualified approbation of the management of this establishment. The chief defect in the Institution is the want of room, which is now being remedied by the erection of a new building which will accommodate about 35 inmates. When this is completed a better classification will be carried out, and improved hospital accommodation, which is much needed, will be provided. The men now sleeping in the gaol, owing to the insufficiency of accommodation in the depôt, will be brought into the same buildings as the other invalids, and will be under more complete supervision.

The ventilation and sanitary arrangements are all that can be desired, but more facilities for bathing and a better supply of hot water is required. The kitchen appliances need improvement, as at present only boiled food can be supplied. By the introduction of a stove, roast meat could be at times given to the inmates, and thus make a welcome change in their present diet. We were informed that a stove, purchased for the hospital but not required there, has been lying in the Government store for the last four years. If this stove were supplied to the Invalid Depôt it would be put to good use, and doubtless would be found a comfort to the institution.

The quarters occupied by the Resident Overseer we found from personal observation to be most unsatisfactory, and they call for immediate attention at the hands of the Government. They are small, damp, and unhealthy, and his children are in consequence always ailing. Dr. Thompson reports them to be unfit for habitation (question 1685).

With respect to this institution, we reiterate our views concerning the advantages of having Official Visitors. We endorse the view expressed by Mr. Jones (question 1522) with regard to the purchase of 15 acres adjoining the land at Glen Dhu already in the possession of the Government, provided it can be purchased upon satisfactory terms. From a personal inspection of the site we feel convinced that it will be required for public purposes ere long, and we saw no position in Launceston more suitable for the uses to which it will probably be put.

The female invalids are quartered in the gaol, but completely separated from the prisoners. A sentimental objection may be raised that it is unfair to the inmates to place them in the same building with prisoners; but we understand that they raise no objection to being placed there. The buildings are in every way suitable for their reception, and the work of nursing being done by the female prisoners, who look upon this as an indulgence for good conduct, enables the authorities to carry on the establishment with great economy, and at the same time with due regard to efficiency and the comfort of the inmates.

In conclusion, we hope that the results of our labours will materially benefit the condition of the Charitable Institutions of the Colony.

It now only remains for us to recapitulate our recommendations in brief.

I.—CHARITABLE GRANTS.

1. OUT-DOOR RELIEF.

1. That in bestowing charitable grants, as little money as practicable should be paid into the recipients' hands; and that when payment of rent is necessary, such rent be paid direct to the landlord.

2. That legal authority be given to the Administrator of Charitable Grants to at once summon relatives of recipients of relief to show cause why they should not contribute to their support; and power be given the Government to recover any expenses in connection with funerals and transport.

2. BENEVOLENT SOCIETY, HOBART.

3. That Government Grants for charitable purposes be distributed, and admission to Government Institutions granted, under Government control.

4. That the disposal of the Government grant for out-door relief in Hobart be taken from the hands of the Society and administered by a Government official.

5. If the present Government subsidy to the Society be insufficient, an additional sum be contributed from the General Revenue, as in the case of the Launceston Society.

6. That a Board of gentlemen be appointed to advise and assist the Government in the distribution of their out-door relief.

4. BOARDING-OUT SYSTEM.

7. That, except under exceptional circumstances, the number of children placed in the care of any foster-parent be reduced to four.

8. That, where possible, boarded-out children be placed in the country.

II.—INDUSTRIAL SCHOOLS.

5. BOYS' HOME, HOBART.

9. That the boys, when practicable, be sent to the Government Farm for instruction in farming on a more extended scale.

7. GIRLS' INDUSTRIAL SCHOOL, LAUNCESTON.

10. That girls under 14 years of age be sent to the State school for education.

11. That more sleeping accommodation be provided, or the number of girls be reduced.

III.—TRAINING SCHOOLS.

9. BOYS' TRAINING SCHOOLS, CASCADES.

12. That some of the boys be sent to the Government Farm for instruction in farming.

13. That the boys be made wards of the Managers of the School until they attain the age of 21.

14. That, to discourage the habit of absconding, provision be made to detain boys two days for every one on which they are unlawfully absent from the school.

10. GIRLS' TRAINING SCHOOL REFORMATORY, HOBART.

15. That the internal forbidding appearance of the building be improved by doing away with its gaol-like aspect.

16. That the girls should be allowed to have more frequent intercourse with the outer world, should their behaviour warrant it.

17. That girls of the criminal class be sent from Launceston to this Institution.

IV.—HOSPITALS FOR THE INSANE.

11. HOSPITAL FOR INSANE, NEW NORFOLK.

18. That the adjoining land be purchased for the purposes of the Hospital.

19. That the buildings in the present back yard be rased, and new buildings with better appliances erected.

20. That legislation be sought which would grant the power to close Grey and Burnett streets, and thus secure greater seclusion for the patients.

21. That a steam laundry and a steam saw-mill, and a proper apparatus for supplying hot water in the male division, be at once supplied.

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22. That a central kitchen, with steam cooking apparatus, be erected.
23. That additional accommodation be supplied to the attendants, both on the male and female side.
24. That a waiting-room be supplied for the reception of visitors.
25. That the reception of casual visitors be limited to two days a week, the medical officers having discretionary power as to the admission of the friends of patients who have come from long distances at any time.
26. That the grounds generally be made more attractive by planting ornamental trees and shrubs.
27. That the Colonial Storekeeper visit the Hospital at least once every three months to examine articles proposed to be condemned, or the Official Visitors be empowered to condemn them.
28. That means be at once taken to secure a higher pressure of water.
29. That a sum of £100 be placed on the annual Estimates to provide pictures, more newspapers and illustrated papers for the patients, and also to afford them the means of enjoying more frequent picnics and other recreations.
30. That a chapel be built for religious service: but we consider that our other suggestions should have first consideration.

12. CASCADES HOSPITAL FOR THE INSANE.

31. That the services of the Head-Attendant be dispensed with, and his duties performed by the Surgeon-Superintendent.
32. That a revised set of Rules be at once published and distributed among the officials, in which the duties of the Surgeon-Superintendent and each official should be detailed, and the leave of absence to be allowed to each official set forth.
33. That a stop-clock, similar to that in New Norfolk Hospital, be supplied to the Institution, to ensure the proper performance of night duties.
34. That there be a strict prohibition against the employment of the attendants for any work not connected with the Institution.
35. That the issue of medical comforts to the patients be increased, and that the quality of the spirits and wines so issued be improved.
36. That in no case should the ordinary discipline of the Institution as to indulgences granted to patients be departed from.
37. That the Surgeon-Superintendent be called upon to discontinue the practice of selling milk to his subordinate officials; and that all refuse from the Establishment be conveyed to the Boys' Training School.
38. That arrangements be made by which the patients could use their recreation ground every fine day.
39. That the present indiscriminate admission of visitors be discontinued, and that in future orders for admission be only obtainable from the Chief Secretary or Surgeon-Superintendent, and then, except in the case of relatives and friends, only on stated days, at fixed hours, and in small numbers.
40. That more attention be paid by the authorities to the cleanliness of the persons and clothes of the patients.

V.—HOSPITALS.

13. GENERAL HOSPITAL, HOBART.

41. That a book be kept at the Hospital, and presented to each patient on leaving, in which complaints as to ill-treatment or neglect could be written down.

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42. That the old buildings about the grounds be at once pulled down and removed, and that the vacant pieces of ground on Campbell and Argyle streets be suitably fenced and laid out as gardens.

43. That more and better store accommodation be provided.

44. That a new kitchen, with modern requirements, be erected.

45. That a separate ward be supplied for male patients suffering from *delirium tremens*.

46. That more adequate sleeping accommodation be provided in the Nurses' Home, and that there be telephonic communication from thence to the hospital wards.

47. That the bath-room and closet accommodation in the old Hospital building be improved.

48. That the system as to the collection of hospital fees which obtains in the Launceston Hospital be adopted in Hobart.

49. That arrangements be made for the training of students, and encouragement given to students from the other colonies to attend a course of anatomy in the Hospital.

50. That a more systematic training of nurses be put in force, as soon as the existing strain caused by the prevailing epidemic of typhoid fever is at an end.

51. That the property at the angle of Liverpool and Campbell streets be purchased for the Hospital.

14. LAUNCESTON HOSPITAL.

52. That a sum be appropriated annually to enable any small repairs to be immediately effected.

53. That the attention of the Lands and Works Department be called to the loss of heat caused by the absence of insulation in the hot-water pipes of the boiler, and also to the foundations of the Hospital, which, as we are informed, are riddled like a rabbit warren, and need an immediate survey.

54. That the preparation of revised Rules should be begun at once, such Rules to contain the detailed duties of every one connected with the Hospital.

55. That proper sleeping accommodation be provided the male attendants, who have now to sleep in the wards.

56. That a ward be constructed for the accommodation of patients suffering from *delirium tremens*.

57. That provision should be made in this Hospital for the observation of suspected lunatics.

15. CAMPBELL TOWN HOSPITAL.

58. That in the event of the erection of the new Hospital not being at once proceeded with, the Government withhold their grant in aid until it is completed.

59. That one member of the Board be appointed by the Governor in Council, to hold office for two years.

60. That the Medical Officer in charge be *ex officio* a member of the Board.

61. That a complete set of Rules clearly defining the duties and privileges of the Board, the Medical Officer in Charge, the Honorary Medical Officer, the Matron, &c. should be prepared forthwith.

17. HOSPITAL FOR CONTAGIOUS DISEASES, CASCADES.

62. That a proper bathroom be at once provided, and that the faulty condition of the roofs be attended to.

63. That the officer appointed by the Governor in Council under the Contagious Diseases Act be empowered to order any suspected prostitute to be detained for immediate examination by some medical man appointed by the Government for the purpose.

18. HOSPITAL FOR CONTAGIOUS DISEASES, LAUNCESTON.

64. That the remuneration of the Matron be made adequate to the duties which she has to perform.

19. LYING-IN HOSPITAL, CASCADES.

65. That the present beds be dispensed with, and others, wider and more suited for the occupants of this Hospital, be provided.

VI.—CHARITABLE INSTITUTIONS.

20. NEW TOWN CHARITABLE INSTITUTION.

66. That a cancer ward, well ventilated and sufficiently large to meet all demands from Launceston as well as Hobart, be at once provided, and that in future no patients suffering from cancer be allowed to occupy the ordinary wards.

67. That modern ventilators be supplied to all the wards.

68. That disinfectants be more freely used throughout the wards, and that the system in vogue in the Launceston Dépôt be adopted.

69. That the establishment be lighted with gas instead of kerosene.

70. That the bathing accommodation in the hospital wards be increased and improved, and that the present disgusting trough system in the lavatory be at once abolished.

71. That greater attention be paid by the officials to the cleanliness of the inmates of the Institution.

72. That the sole power of admission to the Institution should be in the hands of the Administrator of Charitable Grants, and the system of dual control abolished.

73. That two Official Visitors be appointed to visit and report upon this Institution at intervals not exceeding two months.

Female Branch.

74. That the practice of admitting children of tender age into the Institution should be discontinued, and that arrangements should be made for their maintenance under the boarding-out system.

21. INVALID DÉPÔT, LAUNCESTON.

75. That greater facilities for bathing and a larger supply of hot water be provided; and that a stove (now lying in the Government Store) be supplied.

76. That suitable quarters be at once provided for the resident Overseer.

77. That 15 acres of land adjoining that already purchased by the Government at Glen Dhu, be at once secured, provided it can be purchased upon satisfactory terms.

Given under our hands this 28th day of May, 1888.

H. I. ROOKE, *Chairman*.
N. E. LEWIS.
G. F. HUSTON.
WM. BELBIN.
G. FITZGERALD.
HENRY H. GILL.
EDW. D. DOBBIE.
WILLIAM T. H. BROWN.

COMMISSION ON CHARITABLE INSTITUTIONS.

THURSDAY, FEBRUARY 2, 1888.

Present—Mr. H. I. Rooke (*Chairman*), the Crown Solicitor (Mr. Dobbie), Dr. Huston, Messieurs N. Lewis, W. T. H. Brown, G. P. Fitzgerald. Mr. H. T. Maning, *Secretary*.

Examination of MR. JOHN O'BOYLE, Administrator of Charitable Grants.

1. *By Mr. H. I. Rooke.*—How long have you been Administrator of Charitable Grants? Eight years. Was appointed Acting Administrator, 1 January, 1880; confirmed in appointment the following year. I have been in the Department for 20 years.

2. What portion of the funds distributed for out-door relief passes through your hands? All out-door relief in the shape of charitable allowances, funeral expenses, transfers, medical attendance, &c., throughout the Colony, except Hobart. The money is voted by Parliament, and expended by me as circumstances require. I may state that all applications for relief of every kind in the Colony except in the case of Hobart and suburbs, pass through my hands. The Hobart Benevolent Society deals with Hobart and suburbs.

3. From your experience can you suggest any improvement in the present mode of inquiry and recommendation? No, I don't think so. Of course improvements could be effected, but that would be a matter of considerable expense. Everything is conducted economically. No doubt, if an inquiring officer were appointed for each district, or allowances made to the police officers, it would be much better; but that would add materially to the expense.

4. In your report of 1886, you mention the assistance obtained from the police magistrates: do you find the same thing through the municipalities? Yes, I never have any trouble with any of them. The Wardens and Police Magistrates are always ready to give me any assistance I require, as stated in my report.

5. In consequence of the Benevolent Society having the recommendation of relief, do you find that any friction occurs between the Society and the Department of Charitable Grants? I have no connection with the Society. They simply send in their claim, which is approved of. I have no power to interfere.

6. In your opinion would it be better to have all the Colony under one control? Most certainly; I never saw the necessity for any alteration. It was done as a matter of expediency, I believe, in consequence of pressure being brought to bear by the Benevolent Society as then constituted.

7. *By Mr. Fitzgerald.*—What sum is distributed for out-door relief by the Benevolent Society? In 1886 the amount expended was £1270, exclusive of the Benevolent Society proper. There is an allowance of £100 a year on the estimates for the performance of this duty. Originally this work was done in the Chief Secretary's Office; the work became so heavy that Mr. Tarleton was appointed Administrator. An arrangement was made in 1880 for the transfer of the duties connected with Hobart and the suburbs to the Benevolent Society.

8. *By Mr. Fitzgerald.*—And the Society has the complete control of this £1270? Yes, they have distributed the amount without any control whatever. The officer attached to the Society gets his instructions from the Society, and I exercise no control over him in the discharge of his duties.

9. Do you think the expense of your office would be very much added to if this distribution were taken out of the hands of the Benevolent Society and placed under your charge? There would be very little additional expense; but there is no place where the work could be carried on.

10. Then there would be a necessity for some expense in that direction? Yes, it would involve an expenditure of a few pounds. A place would have to be fitted up for serving out rations and work connected therewith.

11. *By Mr. Dobbie.*—Then you think that no other additional expenses than those you have mentioned would be incurred by the Department in making the alteration? I do not think there would be any other expenses.

12. *By Mr. Fitzgerald.*—Would it be a more economical plan of proceeding? It would be quite as economical. If there were any reductions to be made I could make them.

13. *By Mr. Rooke.*—Has the return increased since 1886? I do not think so.

14. *By Mr. Fitzgerald.*—Is it possible, under this dual system, that relief could be given to those who come under your control, and for those persons to obtain relief from the Benevolent Society? No, it would not be possible.

15. In your return for 1886 you mention that a difficulty existed of dealing with relatives: does that difficulty still exist? I pressed a scheme upon the Government of dealing with the relatives in a more summary manner than at present. For instance: when an allowance is made to a person in distress, and paid over to him through the Warden or Police Magistrate, I have to issue instructions to have the

relatives summoned to repay that money; but if the relatives were rendered liable to pay the money directly the necessity arises, I think it would be much better to have them summoned at once to show cause why they should not support the applicants, instead of giving relief first and trying to recover the money afterwards. All sorts of obstacles are now thrown in the way, and I am still of opinion that an alteration should be made; and there is actually no power given to us to recover the expenses in connection with funerals or transfers. I have fully set that forth in the report for 1882.

16. *By Mr. Rooke.*—The expenses in connection with transfers have not increased? No; they will nearly be done away with altogether. Since the extension of the Invalid Depôt in Launceston the want of accommodation has not been felt so much, and therefore the expense of transport has diminished.

17. Then you think the money thus saved will pay the cost of the extension? Yes; it will more than pay the cost.

18. *By Mr. Fitzgerald.*—Do you think the present Boarding-out system has proved a success? Yes.

19. Its operations have been conducted more economically than otherwise? Yes.

20. Have any cases of harsh treatment come under your notice? Very rarely, and not for a considerable time. Many of the persons to whom the children are sent would rather keep them for nothing than part with them. Proper provision is made for the children's education.

21. *By Mr. Rooke.*—You are Chairman of the Central Committee? Yes.

22. Has the expenditure increased?—do they pay more for each child now than before? Yes; it had to be increased from 5s. to 6s. a week some time ago. This was done after due consideration, and on the recommendation of the Committee. The amount has not really increased,—the increase has been in the rate per head. Last year the expense was larger in consequence of the alteration being made in the age at which the children could be apprenticed—13 years instead of 12. A lot of children have been kept on the books till they arrive at the age of 13, in order to comply with the Education Act. They cannot be apprenticed until they are 13 years of age, unless they pass the examination that has been fixed.

23. Can you suggest any improvement at all? I do not know how it can be improved upon. Every care is taken. With regard to the guardians, we have ladies on the committee in Hobart, and a committee is under consideration for Launceston. Everything is as satisfactory as could be desired.

24. *By Dr. Huston.*—What arrangements are made for visiting? We have an inspecting officer (Mr. Judge), whose sole duty it is to make the visits; also the Visiting Committees, and the annual inspection of the Central Committee.

25. *By Mr. Rooke.*—Have there been any cases, within your knowledge, of ill-treatment to these children? There were some time ago some cases in which children got into improper hands, and I used to visit these houses at uncertain times. We found out sufficient to justify us in removing the children. These cases occurred some time ago, but there have been no complaints during the last few years.

26. *By Mr. Fitzgerald.*—Looking at the returns from Launceston and the Municipalities, I see against Launceston the sum of £592 16s. 7d. only: taken on the basis of population there looks to be very much more expense in Hobart than in Launceston: do you think that is attributable in any way to lavishness on the part of the Benevolent Society? No; I do not think anyone could accuse them of being lavish.

27. Then, I presume, there are more paupers in Hobart? Yes. They make for the centres of population.

28. But, taken on the basis of population, the difference should not be so great: can you account for the difference? I cannot account for it. I can only attribute it to the larger number of paupers in and around Hobart. Most of them settled originally in this part of the colony.

29. *By Mr. Rooke.*—Are the blind children still sent away? Yes. The last account was paid the other day; £213 was paid for the maintenance of these children in Sydney. The great difficulty, however, is when they return. It is one of the conditions that they should return to the colony, and we can get them nothing to do. I have two girls at the present time, and can get no employment for them. They are being maintained by the Government in the Industrial School. It is purely a matter of favour that the Governors keep them. There is no field for them here. There is another instance, of a boy who was taught halter-making in Sydney, but as I could get him no employment here we had to send him back to Sydney, and he was apprenticed to a ropemaker there for three years. We have six children in Sydney now. Some of them will, of course, pass to their relatives when they come back.

30. *By Mr. Lewis.*—Do the relatives pay anything towards their support? In only one or two cases.

31. *By Dr. Huston.*—Can you give us any idea as to how much the Government is recouped for their expenditure for out-door relief? Yes. Repayments were made to the amount of £33 9s. 5d. in 1886, but we had a great deal of trouble to get that sum.

32. *By Mr. Rooke.*—There has been an idea in the country that persons have been receiving charitable aid who are not entitled to it: is that the case? I do all I can to prevent such imposition, but I have to rely solely upon the reports furnished to me by the wardens, and we never give relief until a full enquiry is made into each case by the police in the town. It was suggested by the late Mr. Innes, when Treasurer, that I should go round and inspect each case personally; but even in that case I should have to rely upon local information, and it would take up 12 months to go round all the districts and become acquainted with the recipients.

33. In the event of relief having been given to persons which would not have been given had there been an inquiring officer, do you think that the expense of such an officer would be justified? No, I do not think the expense would be saved. I do not recommend the appointment of such an officer. It would not justify the expense.

34. What other departments are there under you? With reference to the hospitals at Hobart and Launceston, I have nothing whatever to do except give an authority monthly for the maintenance of pauper inmates. At New Norfolk all admissions are reported to me, and I investigate the circumstances

in which the relatives are placed, and make an order for the recovery of fees. I have nothing to do with the internal arrangements. Then, with regard to the industrial schools, I investigate the applications for admission and payment, and give authority for payment. The Governors will not receive children without that authority. I certify to the accounts every quarter.

35. How do you manage when they are sentenced to the Training School? I have to make similar inquiries about the relatives, and endeavour to obtain contributions from those who are able to pay.

36. *By Mr. Fitzgerald.*—There is no further Government grant than the 5s. per week to the Industrial Schools? No.

37. And as to the Cascades Asylum? I have nothing to do with that, except to make up half-yearly a demand upon the Imperial Government for repayment to the Colony the sum disbursed for the maintenance of Imperial paupers.

38. Are there many Imperial paupers there? Yes, they are nearly all Imperial paupers at the Cascades Asylum.

39. *By Mr. Rooke.*—Have you any means of tracing recipients of charity who come from the other colonies? Only from their own statements. There was one case found out some time ago, and I sent him back to Sydney, where he came from.

40. *By Mr. Fitzgerald.*—Does the sum allowed by the Imperial Government (£32 a year) include all expenses for the maintenance of Imperial paupers? Yes; it has been arranged so. It includes everything, even burial. The following are the rates:—Hospitals, Hobart and Launceston, and New Town Charitable Institution, £30 per annum each; Hospitals, New Norfolk and Cascade, £32 per annum each; Invalid Depôt, Launceston, and Campbell Town Police Station, where tramps receive temporary shelter, £21 per annum each.

41. And do you think the £32 covers the expense of their maintenance? I believe it covers everything. All these cases were at one time investigated by a Board of Officers. With regard to the New Town Depôt, all authorities for admission pass through my hands. Sometimes a little difficulty arises in this direction. It is my duty, when a person can maintain himself, to order his discharge at once, and perhaps he will apply again soon after being discharged. That, of course, causes a little trouble, but a saving is effected thereby.

42. Is that left entirely to you? If I get a certificate from the Chairman of the Benevolent Society I am satisfied, and give my authority for admission. I enquire into the other cases myself; but the majority of cases are so well known to me that I do not find it necessary to make enquiries. That is the advantage of placing the admission of these people into the hands of one person; otherwise there would be great trouble.

43. *By Mr. Lewis.*—I find the item £180, under the head of Charitable Grants, for an inquiring officer; is that inquiring officer for the Benevolent Society? Yes; his services are entirely at the disposal of the Benevolent Society.

44. Would it not be possible for one man to inquire into the charitable grants in Hobart and also to inquire into the boarding-out system? No, because the inquiry officer has to weigh out and keep an account of all the rations and cash paid, as well as to attend to inquiries.

45. What form does the relief take in town? Hitherto it has been in the form of rations and cash, sometimes both. Recently the Benevolent Society discontinued cash payments altogether; but I am sure that system cannot be carried out.

46. What is the system of giving relief in the country? Cash only. In Hobart all the dutiable articles are issued free, and 2s. 6d. is of more value in Hobart than in the country.

47. Would it not be possible to give the country recipients of charity rations instead of cash? I do not think it would be possible. What with the cost of transit and the duty on the articles the cost would be altogether too great. 5s. given to an individual is of much more service to him, as far as food is concerned, than if the rations were given to him directly.

48. Is the charitable grant given per head greater than the cost per head of persons maintained in the Invalid Depôt? If an old man outside gets relief, it is regulated according to his ability to work, and of course the cost is greater where there are children and the surrounding circumstances are considered. In the depôts we calculate that the cost per head, at New Town for instance, is about 9d. a day; in Launceston it is 10d.

49. Upon what principle do you order a pauper into the depôts? I have no power to order anyone into the depôts. If a man will not go there I cannot force him. All paupers without family ties are recommended to go into the depôts; outdoor relief under those circumstances is refused to him.

50. Under the boarding-out system are the children apprenticed? Yes; they are apprenticed by the Committee and sent into the country, and every quarter I collect from the master a sum calculated at 6d. per week, which is paid into the bank in separate names. At the end of their apprenticeship the money is paid over to them on certificate of good character being received, and that gives them a start in life. I, as a member of the Committee, have to see that they are properly treated, and to report to the Committee.

51. Are they generally sent into the country or the towns? As far as we can we send them into the country; but we endeavour to discover the occupation each child would like, or is fit for.

52. *By Mr. Rooke.*—Are there places where they stop without being apprenticed? We always have indentures made out to keep control over them until they are 18 years of age, so that in the case of anything happening we can claim them. We retain the right of control until they reach the age of 18.

53. *By Mr. Lewis.*—Has that system turned out well, as a rule? Yes. We have trouble occasionally with some of them.

54. Do the Wardens usually get an advance from Government? If they apply for it they get it. Many have. All the payments are made through the Wardens.

55. Will you explain the item medical attendance, £921 15s.? The medical attendance is allowed to persons who could not be relieved otherwise, and who could not be sent into the Hospital. Very frequently such cases arise.

56. If the patient is too poor to pay for doctor and medicine the application is made to you? Yes, if medical attendance or medicines are required my authority must be obtained first. Dr. Barnard attends to the poor in Hobart unless the case is urgent, when the Warden or Police Magistrate has authority to act, reporting as soon after as possible the expenses incurred. There is no medical attendance to paupers in Launceston; they generally go to the Hospital, or are treated as out patients.

57. And what does the item include? Medical attendance and medicines to out-door paupers in the country; it also includes the sum of £218 11s. 9d. for the maintenance of the children in the New South Wales Institution; maintenance and supervision of inmates in the Lying-in Hospital; the Campbell Town and Bischoff Hospitals; and the maintenance of casual paupers at Campbell Town Police Station, and other items as shown in my report.

58. Can you suggest anything to economise the expenditure in these departments? No, not beyond what I have said,—namely, that more power should be given to deal with relatives.

Examination of MR. GEORGE JUDGE, Inspecting Officer under the Boarding-out System.

59. *By Mr. Rooke.*—How long have you occupied the position which you now hold? I have been connected with the Boarding-out System since 1874. In March, 1880, the Government placed the boarded-out children in the care of the Benevolent Society; but on 19th January, 1881, they were transferred to that of the Central Committee for boarding out Destitute Children, and I was then appointed Inspecting Officer. I, however, have other duties to perform, such as making enquiry into cases for which applications have been made for admission to Boys' Home, Girls' Industrial School, Catholic Orphanage, &c.

60. Under what principle are the children applied for and handed over to their foster-parents? Do you look in Hobart first for suitable families? We have only had one or two applications from the country.

61. Do you visit these children regularly? Yes, once every three months, or as occasion requires. Then the Visiting Committee visit them about once a month.

62. Is this Visiting Committee connected with the Government? They are ladies and gentlemen interested in the work, who, being appointed by the Government, act on behalf of the Central Committee.

63. Have they a Superintendent in Launceston? I think the police superintend them in Launceston, as they do at New Town.

64. Do you experience any difficulty in getting people to take charge of the children? Not at the present time; but there was a difficulty some time ago. The Chairman then had to advertise three or four times, and the applications he received were not satisfactory.

65. How do you account for the difference in the cost of maintaining the children in the years 1885 and 1886? The difference is attributable to the fact that in one year it cost a great deal more for clothing.

66. In the event of a child being boarded out, and the parents come back to the colony, do you take steps for the recovery of the money spent for maintaining the child? Most decidedly, if the parents are worth anything. In one case we are getting 6s. a week for one child. We had previously received 12s. for the brother and sister.

67. From your experience as Inspecting Officer, can you suggest any change for the better in the way of economy? No; I really think it the most perfect system in existence, and any change in the way of economy would be prejudicial to the welfare of the children.

68. From what you have seen, are the children treated kindly? Yes, invariably they are treated kindly. There was one case where we did not approve of the treatment of the child, but the case was an exceptional one.

69. Is the remuneration the same in all cases? No. There is a case of a young woman—an imbecile 25 years of age—for whom the sum of 7s. per week is paid. There is another instance of a child who previously to being boarded out was gradually wasting away, and in order that the foster-parent might be able to afford nourishing diet the Committee granted 7s. 6d. per week. That is about 14 months ago, and the child has greatly improved in health since that time. The allowance will be reduced when it has recovered its health.

70. *By Mr. Lewis.*—Is the clothing provided by Government? Yes, in the first instance; but the foster-parents have afterwards to renew it, and keep the children properly clad.

71. Are there any children boarded out in the country? Yes.

72. And are there any brought from the country into Hobart? Yes, a good many.

73. What is the reason? I do not know. Sometimes it is difficult to get foster-parents in the country. There is a greater facility for getting them in town, and their education and supervision can be better attended to.

74. When the children attain the age of 13 years do you supervise them? When they are apprenticed I see them once a quarter, and at these periods I collect sums at the rate of 6d. per week, which are placed in the bank to their account. I always see the children once a quarter, and if they were not properly cared for I would consider it my duty to report the case to the Central Committee.

75. Would it not be possible to keep these children in the country? We could not get foster-parents enough. And then there is the difficulty of supervision to see if they are properly treated and sent to school regularly.

76. Do you, in conjunction with Mr. O'Boyle, make enquiries as to the character of the persons with whom the children are placed? When requested by the Chairman I enquire into the character of persons seeking to become foster-parents, and on my report the Central Committee decide whether or not they are suitable. They also decide on my report as to the child's claim for charitable support.

77. *By Dr. Huston.*—What is the largest number of children placed under a foster-parent? The utmost is six. At one time we had seven in one family.

78. Under what circumstances? If the person has the accommodation for them. Of course, where there are so many placed in one place, the foster-parents have no children of their own. Most of them are widows.

79. *By Mr. Rooke.*—Where there are five or six does the woman do anything else for a livelihood? In most cases they do not. Scarcely any of them are depending upon the money they receive for maintaining the children. They can, however, make a little out of it.

80. If you recommend such a large number as six to be placed in the hands of one woman, do you assure yourself that she is quite capable to fulfil her duties? Most decidedly. I never recommend them unless I am certain about the matter. The Central Committee do not allow so many unless they have had experience with the woman.

81. Do you consider the money is properly expended, and that the children are well looked after? I certainly do.

FRIDAY, FEBRUARY 3, 1888.

Examination of MR. W. WITT, Registrar of the Benevolent Society, Hobart.

82. *By Mr. Rooke.*—You are Registrar of the Benevolent Society? Yes, and have been 28 years in that position.

83. Have you charge of the Benevolent Society's Department? Yes.

84. Do you issue both rations and the Government money? No, the Government relief is issued on the other side. The society has a subsidy from Government, and the remainder is raised by private subscriptions.

85. Does the sum of money expended in out-door relief by the Benevolent Society approach the sum disbursed by Government for that purpose? No, it does not nearly approach that amount.

86. How do you distinguish the applicants for relief? In the first instance the applicants are put on our books for three months, sometimes for six months, or even longer, and they are then transferred to the Government as permanent cases. They must obtain relief from the Benevolent Society first before they are recommended for Government relief.

87. Do you draw the whole of the Government grant of £400? We have generally done so, but last year we had nothing.

88. Why? I put in the usual certificate at the end of the first six months, and I collected £220. I applied for the first instalment of £200, but it was never placed to our credit.

89. Did that necessitate the expenditure of extra public money? Not public money; we have spent our own money taken from the sinking fund, and we have also overdrawn £300, for which we are obliged to pay interest.

90. From your experience here, do you think that the Benevolent Society would work better if it received the Government subsidy and private subscriptions, instead of the present dual system? No; the Society has saved the Government a large amount of money.

91. *By Mr. Dobbie.*—How long is it since the society has had control of the Government grant? Between eight and nine years.

92. Can you tell the Commission how the Society came to be placed in that position? The reason was that the Government of the day thought that we could manage it better than they could, and the Committee, after great consideration, took it over. It was taken over at the express request of the Government.

93. Are you of opinion that the present arrangement of Government and Benevolent Society relief is a good one, judging from your own experience? No; if it had been left purely in the hands of the Benevolent Society the amount would never have been so great. The public outside are mixed as to the relief afforded by the Benevolent Society and the Government aid.

94. Then you think that the distribution of that money should not be left in the hands of the Benevolent Society at all? My opinion is, that whatever money had been expended would have been better laid out by the Benevolent Society. If the Government had given the Society the entire charge of the money in a lump sum, the Government would be in a better position to-day.

95. *By Mr. Rooke.*—The relief given by the Society is, I presume, mostly in provisions? Yes, except in extreme cases. For more than 20 years I distributed the relief in kind only, and we had very little trouble.

96. Do you investigate all the cases yourself? Yes, I make inquiries, and submit the cases to the Committee.

97. *By Dr. Huston.*—In the exceptional cases which you have alluded to when money has been granted in addition to the provisions, what is the largest amount given by you to any applicant? Sometimes we have given 2s. 6d., and sometimes 5s. Last winter, when the distress was so great in consequence of the sickness prevalent, and many persons died leaving families in want, we deemed it right to grant money.

98. *By Mr. Dobbie.*—Is it your opinion that the £1200 disbursed by the Government through Mr. Catley should be handed over to the Society, like the £400? Yes, or a sum that would be equal to it in point of usefulness. I think it would be a saving to the State; the expenses would be far less.

99. How do you think the expenses would be lessened? Every case in which relief is given by the Society goes through my hands, and the Committee deal with each case upon its merits. In any case in which it would be considered advisable to grant money a small amount would be given, but nothing like the amount that is given now.

100. But is it not a fact that all these cases are investigated by the Benevolent Society?—the money is not distributed in a haphazard way? No; if there is a case that requires investigation I speak to Mr. Catley concerning it. Supposing a report is made that a person is obtaining relief who is not entitled to it, then I make enquiries about the matter; but as a rule they are dealt with by Mr. Catley. For the last eight years all these cases have been through my hands in the first instance.

101. But supposing the system were changed, and the Benevolent Society had the sole control of the money, where would the saving be effected?—what change would be made? There are many cases on the Government side at the present time who would not get money then. The money would not be so liberally bestowed.

102. The money is not, however, granted to recipients unless on the recommendation of the Society? Well, we do not interfere too much. In this direction the saving would be effected by the change.

103. *By Mr. Lewis.*—In the estimates for the year I notice under the head Charitable Institutions the sum of £180 put down for an enquiring officer—to whom does that go? To Mr. Catley, on the Government side.

104. Do you receive your salary from the funds of the Benevolent Society? Part of it. There is an allowance from the Government of £100, out of which I receive £50, and the chairman receives £50. The remainder of my salary is paid from the funds of the Benevolent Society.

105. Would it be possible for any one individual to receive aid from the Government side, and also from the Benevolent Society? That would be impossible. They must receive assistance from me first before they go on to the Government side.

106. Does it often happen that you do not raise the £400 by private subscription in order to entitle you to the Government Grant? Our annual income is always larger than that amount; but on the last occasion the objection of the Auditor was that we drew upon the interest account, and added it to the money raised by subscription to make up the deficiency.

107. Do you think that the granting of Government money interferes with the subscriptions to the Society? I am sure of it. The subscriptions have been gradually falling off. The people mix the two things up, and say, "Oh! you have plenty of money—go to the Government." It has certainly been a saving to the State.

108. *By Dr. Huston.*—How are your subscriptions collected? Personally. Many of our good friends still pay their subscriptions; but when the Government money was first spoken of, one of our statesmen remarked to me that the Society would be the loser, and we have proved the truth of that remark.

109. *By Mr. Lewis.*—What is your opinion of charities issued in the form of cash? My opinion is that the system has a bad effect.

110. In Launceston and the municipalities the Government aid is issued under the control of the Administrator of Charitable Grants—do you think it would be better to have the same system in Hobart? My opinion is that the money should be put into one channel, namely—the Benevolent Society, and then the State and people would be benefited.

111. Do you ever administer assistance to any persons who have relations able to pay for their support? Not if we know the circumstances. Our investigations have been very strict on that point, and cases have come under my notice, but very rarely, in which relief has had to be refused on this account.

112. Would you decline to grant assistance to persons who have relatives able to support them? Yes, most decidedly.

113. Do you think that the Government aid has had any ill effect? I have always protested against any member of my own church receiving Government aid. It shuts out private charity. All the churches are to blame in that respect.

114. You have relieved a great many children. Can you account for the large number of children that receive relief in Hobart compared with the number receiving charity in Launceston?—are they all deserving cases? They are transferred to the Government. If a widow comes into town with children, I keep them on our books for a time, and then they are transferred to the Government side. Of course an investigation is made before they are placed on our books.

Examination of the REV. J. W. SIMMONS.

115. *By Mr. Rooke.*—You are Chairman of the Executive Committee of the Benevolent Society? Yes.

116. Does your Committee recommend the granting of the Government money, and the issuing of rations? Yes; but we are doing more in the way of rations at the present time.

117. Does the person applying for Government relief go through the Benevolent Society first? As a rule persons are on the books of the Benevolent Society for three months, but not in every case. There are cases of old recipients of charity who are taken over by the Government at once, and put on the Government books.

118. Do you think that the system of disbursing the money on the recommendation of the Benevolent Society—the dual control, as it were—a good system? It saves a large amount of overlapping. If the two offices were united, without this overlapping it might prove an advantage; but otherwise there would be a large number on both books. In South Australia the system is under a Board, with a paid Chairman, and everything is done in the way of rations; no money is distributed.

119. Looking over the list of subscriptions to the Benevolent Society in Hobart, I find that they have diminished since you took the control of the Government grant. Do you attribute this to the fact that the Society has the control of that money? Yes, purely and simply.

120. *By Dr. Huston.*—How is the relief given in South Australia in the rural districts? By the storekeepers. The Warden or Mayor of the district makes application to Destitute Board, and if considered deserving orders are forwarded to be given to applicant.

121. *By Mr. Lewis.*—Do you think the Government aid would be as economically and as efficiently administered by the Police Magistrate and by the police in Hobart as it is done in Launceston? I think it is done at the present time as economically and efficiently in Hobart. We get a large number of persons from all parts of the country, and it is difficult to obtain all particulars of each case.

122. But would not the police be able to find out the particulars better than the Inquiring Officer? Sometimes, but not always. I think we can often get information more accurately.

123. Would you, as Chairman of the Benevolent Society, be glad if the Government took the administration of the Government out-door relief off your hands? That is a difficult question to answer. So far as I am personally concerned, I would be glad to see it under one authority. If you administer from two offices, you get the same parties.

124. *By Mr. Rooke.*—Don't you think that that danger is obviated by the returns being sent in to the Charitable Grants Office? To prevent it, an interchange of reports would be necessary.

125. Is it really necessary that you should administer rations for a specified period before transferring them to the Government books? We make it three months.

126. But if you do not receive the £400 from the Government, you have the power of succouring the people by putting them on the Government books. Yes, we have the power to do so, but have not used it.

127. *By Mr. Lewis.*—Do you think there are any persons receiving charity who do not deserve it? If you speak of the persons who receive money, so long as money is available their relatives will bring pressure to bear to get them relief in this form; but it is quite different with regard to provisions. We have had many cases during the last few weeks of persons who have simply refused to accept provisions.

128. Therefore you consider that cash payments are not good? Except in very rare cases; and even then I would like to see the rent paid for them instead of paying them the cash.

129. How do you account for the large number of children receiving relief? I consider that the number is excessive, but it is owing to parental neglect. There is also the fact of many widows having large families.

130. But if any of the children's parents or relations were in the Colony, they could be forced by law—if the law were so altered—to support them? In that case the law would be altered in the way of criminal procedure. I would certainly recommend that, so that they received aid under such conditions that they could not waste the provisions given.

131. Mr. O'Boyle suggests an alteration in the Public Charities Acts so that the relatives would be forced to pay before the relief was granted: do you recommend that? No; I would grant the relief first and proceed afterwards. There is a great difficulty in this direction at present. For example—a man may be sentenced this morning, and his wife and family come to the Benevolent Society immediately for relief.

132. *By Dr. Huston.*—But in cases like that, in the event of the woman having relatives who are able to pay towards the support of the children, do you recommend that the law be altered to meet the case? Yes.

133. *By Mr. Rooke.*—As Chairman of the Benevolent Society can you make any suggestions with regard to charitable institutions? Yes; assist the people to help themselves in every way possible. As it is now, everything is done for them.

134. Is it within your knowledge that people from the other colonies receive charitable aid? We have had a few immigrants on the books, but we have not had many from the other colonies. But the English Act empowering the guardians to send paupers out to the colonies will make it rather trying for us.

135. *By Mr. Lewis.*—Do many come in from the country? Yes, a great many.

136. Do you find more recipients on your books from the country than from Hobart? Speaking at the moment, I should think that half the cases are from the country.

137. Do you get any cases from the northern districts? Not very many.

138. Are the cases those of single people or families? Very often in the shape of families.

139. Do you think that the excess may be attributable to the fact that the Benevolent Society distributes the Government grant? Yes; people all over the colony think they have a right to it. They do not ask for charity—they make a demand. Where there is money to be obtained they will come and insist upon having it.

140. Do you think they come to the Hobart Society particularly in consequence of this? I do.

141. Do you think that if it were made discreditable to receive this aid there would be less of it? The issue of rations is looked upon as discreditable. The new departure will save at least £300 a year.

142. And has the distress been increased? I do not think so.

143. *By Dr. Huston.*—Do you think the system as conducted by the South Australian Government a good one? Yes. At the present moment there is no line drawn in the Tasmanian system; as it is now the relief in money is scattered broadcast. Were it otherwise, and were we in a position to step in, I have no doubt that a great deal of good would be done, and to really deserving cases.

With the permission of the Royal Commissioners, I desire to emphasize my evidence given before the Select Committee of the House of Assembly, more particularly my answer to question 398 in Paper No. 154, House of Assembly, 1885. In addition to that statement, I would urge with all possible earnestness the value of classification in our Benevolent Asylums, and the importance of providing comfortable accommodation, say in the way of cottages. English Alms Houses will be familiar to members of the Commission—for aged and deserving poor couples. The extension of the school penny bank system, with the teaching of thrift in our public schools; the establishment of industrial life assurance; and the German system of compulsory saving on the part of young people earning wages, between 14 and 21 years of age. In a word, I venture to submit that the charitable system of the Colony should not only provide for the poverty of the present, but prevent the possibility of any large amount of poverty in coming generations.

Forms of the Destitute Board of South Australia accompany this statement.

TUESDAY, FEBRUARY 14, 1888.

Examination of MR. W. CATLEY, Inquiring Officer for the Benevolent Society.

144. *By Mr. Rooke.*—You act as Inquiring Officer for the Government through the Benevolent Society? I do.

145. *By Mr. Gill.*—Were you in the Charitable Grants Department when the distribution of out-door relief was transferred to the Benevolent Society? Yes, long before. I have been a Government Officer for 33 years, and most of that time employed making inquiries.

146. Do you think the Government acted wisely in transferring the management of Charitable Grants to the Benevolent Society? I do.

147. What reason have you to suppose so? There has been a great saving effected, and that is my reason for supposing that the action was a wise one.

148. Have not the Committee of the Benevolent Society been in the habit of turning paupers off their books and sending them into the Dépôt in order that they might be able to show a saving? No.

149. What is the usual allowance of rations to one person? It depends upon the state of health the recipients are in. The scale varies; if a person is old and decrepid he will receive more than one who is able to do a little work.

150. What is about the value of a full ration? About 3s.

151. Does it not cost three times as much to maintain a pauper in the Dépôt as it does on out-door relief? No; a great many of our old people are subsisting on a full ration; but it cannot cost as much to maintain them on out-door relief as it does in the Dépôt. We are supporting many by out-door relief who would otherwise go into the Dépôt.

152. What salary does Mr. Witt get for inquiring into cases of out-door relief? £50 per annum.

153. What does he receive from the Hospital Board? £52 10s. per annum.

154. Does he also receive a salary from the Benevolent Society? Yes, £170 per annum and free quarters.

155. Was Mr. Judge employed in the work of inquiry previously to, and for a short time after, the management was handed over to the Benevolent Society? Mr. Judge was appointed long after I had the work. At one time I had the sole control, but Mr. Judge was appointed to assist me.

156. Do you think the present dual system of granting out-door relief one that would recommend itself to you? I certainly think that the system should be free from the danger of overlapping—I mean that the Benevolent Society should have the entire control of the department. They have always done so admirably, and effected a saving, as is clearly shown by the figures. I think the Society should have the sole management.

157. *By Mr. Dobbie.*—What do you mean by having the sole management? There has been a great deal of correspondence between the Government and the Society relative to the management. The Committee propose a change that will effect a saving of £300 a year. A great many suggestions have been made to the Government by the Benevolent Society, but they have not been carried out. There is a misunderstanding existing.

158. Are you a Government official? Yes.

159. Between whom is the misunderstanding? Between the Committee, through the Chairman, and the Administrator of Charitable Grants.

160. How did the friction arise? It was in consequence of the suggestions of the Society not having been carried out. These suggestions were in the direction of the distribution of funds.

161. You formerly had the control of the boarding-out system: at that time was the system as expensive in its working as it is now? I have reason to believe that it was quite as expensive.

162. Supposing the Benevolent Society did the whole of the work, could a saving be effected? I think a saving would be effected if that were done.

163. Do you think there would be a saving if the whole work was done under Government control? No, I do not think so.

164. Explain your reasons for forming that opinion? The outdoor pressure that is brought to bear on the Government by ministers of various denominations and others would still exist. We find none of that trouble, and the consequence is each case is investigated and relieved according to its merits. Directly the system is in the hands of the Government they would be looked upon as a milch cow.

165. Do you mean that if the system reverted to the old plan the saving would be counterbalanced by the greater expenditure in out-door relief? Yes.

166. You think the Benevolent Society should have the control: are you referring to the money that is disbursed for out-door relief by the Benevolent Society? No. I think it would be better if a round sum of money were granted annually. If the Society received a sum of money annually, free from Government restraint, it would work far better.

167. Then you would become an officer under the Benevolent Society? Yes; I think that would be far better, provided I received my pension.

168. *By Mr. Rooke.*—In the report of 1886 the sum of £800 appears as having been granted for out-door relief in the shape of cash. What is your opinion with regard to granting cash? I would abolish cash entirely. It has been a great evil.

169. *By Mr. Brown.*—What is cash generally given for? Rent only in most cases.

170. What has been the effect of altering the system of relief from money to rations? The new system works admirably; I find that the change is most beneficial. Those parties from whom complaints might more naturally have been expected have been the last to complain. Many single persons who were receiving money before grumbled at the alteration, and in some cases refused the rations.

171. *By Mr. Lewis.*—Upon what principle are admissions to the New Town Institution granted? Upon the principle of poverty. Many cases are admitted six or eight times annually. When they apply to be admitted they have to pass a medical examination at the Hospital, and if it is ascertained that they are incapable of doing work they are sent to the Dépôt. The Chairman never refuses a case certified as a fit case for Dépôt.

172. Can you refuse to give them relief, and say "Go to the Dépôt?" That power has very seldom been exercised, and these cases bore the certificate "able to work." The better class of people have a very great abhorrence to go into the Dépôt.

173. What is the reason for this objection? Want of classification, I believe. We are continually hearing complaints from the better class of people about the characters they have to associate with while in the Dépôt.

174. How many cases have you sent into Dépôt, declining to grant them out-door relief, during the last year? Not a dozen.

175. Do you think you could perform all the duties of Inquiring Officer now as you did in the past? Yes, provided the Government relieved me of a lot of unnecessary work that I have to do now.

176. Do you frequently get the wives and families of persons who are sent to prison on your books? Yes; in some cases before the prisoner is removed from the court to the gaol the wife asks us for relief.

177. Can you make any suggestion as to the granting of relief? Not more than I have done. There is hardly a poor family in the city who is unknown to the Society, and we know pretty well in what shape to grant the relief.

178. *By Mr. Gill.*—What is the rule with regard to paupers who desire to leave the Dépôt? The rule is, that they are detained in the Dépôt for three months; but if they wish to come out before that period has expired communication is sent to the Administrator, who forwards it to the Chairman. They cannot leave before the time has expired without permission.

179. Can you account for the falling-off of the subscriptions to the funds of the Benevolent Society so much lately? I think it may be partially attributed to the fact that the public are under the impression that they are assisted by the Government.

180. *By Dr. Huston.*—When you were distributing relief in the form of money, did you find that it was abused in many cases? My own opinion is that it was abused. I believe that there is not a case on the books at the present time that is not deserving of relief; but when money was granted there was a great deal of pressure brought to bear upon the Committee of the Benevolent Society endeavouring to hamper their decision. Rations should meet all cases of poverty.

181. *By Mr. Rooke.*—Would it not be better if, instead of the money being given to the recipient of charity, it was given to the landlord in payment of rent? That is done in all suspicious cases, but not in every case.

182. Is it not a fact within your experience, that poor people who received money from you have refused rations? I have had several cases where the recipients, although desirous of obtaining relief in the shape of money, actually refused rations.

183. *By Dr. Huston.*—Has it ever come under your notice that the money has been spent in drink? No, I never detected any cases of that kind.

Re-examination of MR. GEORGE JUDGE, Inspecting Officer under the Boarding-out System.

184. *By Mr. Gill.*—How long were you employed in the distribution of charitable relief? Seven years.

185. Do you think that the Government made a saving by handing the management over to the Benevolent Society? I do not.

186. Do you think the Benevolent Society have made a saving? The saving is more apparent than real.

187. What do you mean by being more apparent than real? A great many people have been taken off the books and sent to the Invalid Dépôt. Each case on the books costs 1s. 6d. for half a ration, and it costs 3½ times as much to maintain a person in the Dépôt.

188. Is it not true that the late Administrator of Charitable Grants spent more in out-door relief than the Benevolent Society does? It is; but it should not be overlooked that the Colony was not in anything like so prosperous a condition when Mr. Tarleton was Administrator of Charitable Grants as it was afterwards when the management was handed over to the Benevolent Society. However, from the latter end of 1878, when the Colony began to improve, to 1st March, 1880, the Administrator of Charitable Grants made a most substantial reduction. The Benevolent Society did not, during the first twelve months, make the saving they expected, and in consequence of the difficulty they experienced, and in order to make a favourable appearance, sent several persons to the Invalid Dépôt.

189. Did the Administrator of Charitable Grants make any reduction previous to the transfer? Yes.

190. How can you show that he did so? By the books; I can point it out clearly.

191. Do you think the admission to charitable institutions and the distribution of charitable relief should be granted by the same person? Most decidedly.

192. Do you think the Chairman of the Benevolent Society the most suitable person to be entrusted with the management? Certainly not. The Government should have the management.

193. What is your reason for thinking so? In the first place, it at present costs £100 more per year for officers' salaries than it would if the Government had the management; secondly, as the jurisdiction of the Benevolent Society, or rather that of its Chairman, would be spread over a wider range, the friction which at present exists would be extended and intensified; thirdly, that in order to show a saving in the expenditure for outdoor relief, he might take advantage of his ability to do so by sending a lot of paupers to the Dépôt.

194. Is there a lying-in establishment in connection with the Benevolent Society? Yes.

195. Who pays for the cases treated there? The Government.

196. Could not the Government manage this business more economically than the Benevolent Society? Yes. In the first place the Government would not require the services of the nurse and the doctor.

197. There appears to be some friction between the Boarding-out System and the Benevolent Society with reference to the cart; can you account for this? Yes; I think it is jealousy on the part of the Society. They want to have the holding of everything—to have one cart for themselves and one for the Boarding-out System.

198. Do you think that one cart is sufficient? Yes, quite sufficient.

Examination of DR. COVERDALE.

199. *By Mr. Rooke.*—You are Medical Officer in charge of the Cascade Asylum? Yes.

200. What appointments do you hold, and what salary do you receive? I have charge of the Cascades Asylum, and also the Lock Hospital, receiving a distinct salary for each—£250 per annum for the Cascades, and £50 per annum for the Lock Hospital. I have to attend the Training School and the Lying-in Hospital, when required, without salary.

201. With regard to the management of the Cascade Asylum, are the officers and warders supplied with copies of the rules and regulations of the Institution? As a rule they have been supplied to the head-keeper.

202. Are the rules and regulations exhibited in any portion of the Asylum? I do not know of my own knowledge, but have asked the question, and have always understood that the rules and regulations were hanging in the warders' rooms.

203. How many warders have you altogether? We have six attendants, two under-attendants, and the head-keeper—nine altogether.

204. How many persons are confined in the top yard? Twenty.

205. And how many warders do you station there? Three.

206. Are they kept constantly there? Yes; we always keep three there.
207. Could any of the warders be dispensed with? No; they are all required.
208. Are any of the warders employed to do work for you privately? No.
209. Is it a fact that one of the warders named Leary was sent to Battery Point for green stuff on November 17th? Yes.
210. In his absence was another warder told off to do his duty? I do not know.
211. In consequence of his being away, was one of the patients—a man subject to fits, and unable to take care of himself—left alone? Not that I am aware of.
212. Do you keep cows and pigs? Yes.
213. Who looks after the cows? A pauper, one of the Invalid Dépôt men.
214. Do you sell milk from these cows? Yes, to the warders.
215. For what purposes are the men from the Invalid Dépôt employed there? One is employed as a carpenter, one as cook, assistant cook, &c. We have six altogether.
216. Are they supplied with clothing from your establishment? Yes; they are a loan from New Town, and would have to be supplied with clothing by Government in any case.
217. Is the time of the carpenter fully occupied? Yes.
218. How many times a day do you visit the yards? I go round every morning.
219. Do you see the inmates having their meals? I do not make a practice of seeing them at their meals, but I see them occasionally.
220. What becomes of the refuse of the establishment—the pigs' food? It is sent to the Training School; it is not used on the establishment.
221. What is done with the suet, fat, &c. from the kitchen? I do not know.
222. Has the cook ever received orders to sell it? No.
223. Was a robbery committed at the Asylum when Mr. Muirhead had charge of the stores? Yes.
224. What steps were taken at the time? The matter was reported to the Government as soon as it was found out, and the bonus which Mr. Muirhead was likely to receive from the Government was stopped on that account.
225. Had you any idea who committed the robbery? No. The first intimation I received was from the police, who came to search one of the warder's huts. A large quantity of the stolen articles were discovered in the hut, and I was made acquainted with the facts. This took place four or five years ago, and the man received a sentence.
226. Is the Government property used by the officers at all? It should not be.
227. Is there any watch kept over the Government articles in use? I do not know.
228. Have any of the warders been reported to you for taking the patients' bread and soup? No.
229. Has Leary ever been insolent to you and defied you to discharge him? No, certainly not.
230. Do the sick get proper medical attendance and nourishing food? Yes. The food consists of oatmeal, soup, and meat. The patients prefer oatmeal to anything else. I am in constant attendance on the sick, and always ask them which they prefer.
231. With reference to a man named Lankey, who died in the Institution, did he receive proper medical attendance? Yes. He came to town from New Norfolk suffering from disease of the heart and lungs. He never used to walk about, but always sat in a chair. Directly he did not take his food he was put to bed, and died about three or four days afterwards.
232. There was another man named Keogh who died in the Asylum: what were the circumstances connected with his death? He went about to the very last.
233. Was there any blood found on the floor, bed, and bedding? Yes; he bled a little when the catheter was passed to enable him to pass his urine. Dr. Smart called my attention to it.
234. Did Dr. Smart pass the instrument first? Yes.
235. And you did it afterwards? Yes.
236. What was the result? We were obliged to pass the catheter for the reason I have mentioned; but there was no blood the second time.
237. Do you remember the illness of a man named Garfield? Yes. He was bedridden for weeks.
238. Was his condition reported to you by Mr. Muirhead? Yes. Directly the man became sick the fact was reported to me. He was then put to bed and kept there.
239. Is it possible for a man to be ill without your knowledge? No.
240. What are the duties of the night watchman? His duties are simply to go round and see that all is quiet.
241. Is there any check upon him? No, except the report that he makes in the morning, which I examine.
242. What is the cost of the uniforms supplied to the officials? Each suit costs about £1. At first they cost 30s. each.
243. Did a man named Charles Howard receive a new suit on leaving the Asylum? Yes; he was due for a suit at the time of his leaving.

244. Is the material from which the uniforms are made good? No, it cannot be very good for the price. It is common blue serge.

245. How often do the official visitors visit the institution? Once a month.

246. Is it known when they are coming? No.

247. Prior to the visit of the Commissioners, was there any special cleaning and putting things in order? No. We did not know that the Commissioners were coming, and there was nothing done particularly.

248. Do the official visitors examine the Institution carefully? Yes, they go through the establishment.

249. Do they take long in their inspection? They usually take two or three hours.

250. Are disinfectants used in the W. C's? Yes.

251. Do the patients who are able to get about take regular exercise in the recreation ground? Yes, they take daily exercise from 9 o'clock till 12 when the weather permits.

252. Are fires kept up during the winter? Yes, regularly.

253. As to the visits made by strangers to the institution, do you think it is a good thing for the patients to allow so many the privilege of going through? No, I do not think it is a good thing.

254. Would it be better that no one should be allowed to do so unless an order was presented from the Chief Secretary? I would certainly approve of that plan, and I would also suggest that the visits be made on certain days and between certain hours. We have a great many visitors, and in my opinion they disturb the patients.

255. Can you trace the frequency of these visits to any person? Yes; I have traced them to Mr. Muirhead, who has given them *carte blanche*, representing himself as Superintendent of the establishment.

256. On an average how many visitors do you receive a-day? Two or three a-day on an average. They come in too great numbers at one time; that is my great objection.

257. *By Mr. Gill.*—Do you think that the duties of the keepers could be combined, so as to economise? I think the head keeper might be dispensed with, but a storekeeper would have to be appointed, who, after performing his morning duties at the store, could go to the yard, and thus strengthen our staff. The number, however, would not be reduced by the alteration. With regard to the present arrangement, I may say I was opposed to it from the first. Subsequent to the robbery I wrote to the Government with reference to the appointment of a storekeeper, and one was appointed; but a short time ago, in order to economise, they gave Mr. Muirhead an increase of salary and made him do the duties of storekeeper. Mr. Muirhead had been the head of the yard.

258. What are the head-keeper's duties? Simply to see that the place is kept clean by the warders.

259. And could not the under-keepers do that? Yes.

260. When the Commissioners go round the wards, do the warders accompany them? No; Mr. Muirhead usually accompanies them.

261. *By Mr. Brown.*—Who drew out the rules for the management of the establishment? They were drawn out in 1877, when the patients came up from Port Arthur, and have since been altered in matters of detail by myself.

262. With reference to the milk supplied to the warders, do they only get sufficient for their own use? Yes, only enough for their own use.

263. Are the rations supplied to the patients sufficient to maintain a proper state of health? Yes, judging from the appearance of the men and their condition. But they do not like the rations supplied now as well as they did those supplied some time ago. A change was made, some butter being given, and less meat. This was not agreeable to the patients, but still the diet answers very well.

264. *By Mr. Dobbie.*—Do your duties in connection with the Lock Hospital occupy much time during the year? No.

265. And with reference to the Training School and Lying-in Hospital? I only go to those institutions when I am sent for. My principal duties are superintending the Cascades Asylum for the Insane.

266. Then the head attendant does the same work as you do? Yes, just the same; I have to go over the establishment, and am responsible.

267. Suppose the head attendant was dispensed with as you have suggested, what would be the saving? I think there would be a saving of £100 a year. If the alteration were made I could call upon the storekeeper to do a great deal that I cannot ask Mr. Muirhead to do. Our staff of warders is very weak at the present time. We have only five warders on day duty, and they are not sufficient.

268. Do you think the buildings generally are suitable for the purposes for which they are used? Looking upon the buildings as merely temporary, I think they answer very fairly; but it was always understood that the asylum would be merged into the New Norfolk Asylum. Putting that supposition on one side, I do not think the buildings are suitable for a lunatic asylum.

269. Do you entertain any hope of the men being restored to their senses? No.

270. What is the place like in the winter time? In the winter time it is very wet and miserable. On the whole I do not think it suitable for a lunatic asylum.

271. If the patients were transferred to the New Norfolk Asylum do you think a saving would be effected? Yes; the staff would be reduced. One staff of men would do extra work, that is, they could overlook more patients.

272. And would you get more efficiency by the change? I dare say that would be the case.

273. Then you approve of the transfer? Yes.

274. *By Mr. Belbin.*—Are they all criminal lunatics at the Cascades Asylum? Yes, with the exception of one or two from New Norfolk.

275. *By Mr. Lewis.*—Do the paupers employed by you give satisfaction? Yes.

276. Would you wish for more paupers? No.

277. Are any of the insane fit to do the work done by the paupers? No.

278. Are all the patients on the same footing? Yes, they are all treated the same.

279. What privileges does De Bomford enjoy which the others do not? The privilege of going from one yard to the other by himself.

280. Does he take his meals with the rest of the patients? No; he takes them alone.

281. What extra rooms does he occupy? Only one room which he uses as a sitting-room.

282. What regulations are there for visiting?—can the friends of patients visit them at any time? Yes, on application to me.

283. Are the attendants taken away from their duties to accompany these visitors round the place? No; the head-keeper does that, and in his absence it is done by the under-keeper.

284. Are you responsible for the discipline of the attendants? Yes.

285. Do you insist upon their always wearing uniform? As a rule I do not, provided they are clean. They put on an old suit of clothes when doing dirty work.

286. Do the official visitors visit the Hospital during the night? No.

287. Do you consider the man Meehan insane? I cannot say whether he is or not.

288. Is he at the hospital still? Yes.

289. How has he behaved himself? Very well. The official visitors were there yesterday, and were strongly of opinion that he should be let out.

290. In your opinion was it right of the gaol authorities to send him to the Hospital at the expiration of his sentence instead of sending him to New Norfolk? He had not quite finished his sentence when he was sent there.

291. If a criminal were sent to you from the gaol before the expiration of his sentence, and the term of his sentence expired while he was with you, would you not consider it to be your duty to release him and send him to New Norfolk? No.

292. Can you recommend that this man be released? No, not at present.

293. Why was he placed in the upper yard? Because he was represented as a violent character in the first instance; but he is in the lower yard now.

294. Would there be a greater chance of his recovery if he were sent to New Norfolk than if he remained with you? He has been to New Norfolk several times, and it does not seem to do him any good.

295. How do you account for the fact that the cost per head is more at the Cascades than at New Norfolk? Because we receive no contributions.

296. What was the agreement between the Tasmanian Government and the Imperial Government as to the cost per head? I cannot say more than that I was informed that the Imperial Government agreed to pay £32 per head, and the cost amounts to over £38 per head, the Tasmanian Government having to pay the rest.

297. Are the provisions supplied by contract satisfactory? Yes.

298. Are the medical comforts satisfactory? Yes.

299. *By Mr. Gill.*—Would you recommend the discharge of the man Rew? I recommended his discharge some time ago, but no notice was taken of it.

300. Do you think it wise to allow patients to amuse themselves with tools? If they are in a fit state I do not object.

301. *By Mr. Brown.*—Are the books of the institution inspected by the visitors? Yes.

302. *By Mr. Rooke.*—Can you suggest any improvements in the management? No, not more than I have already spoken of with regard to the appointment of a storekeeper, who would also perform other duties in the yard.

303. Can you recommend any improvement in the Hospital for Contagious Diseases? No, there is nothing wanted there; the one nurse is quite sufficient, and the buildings are satisfactory.

304. Does the same remark apply to the Lying-in Hospital? Yes.

MR. JOHN EVENDEN *called in and examined.*

305. *By Mr. Rooke.*—You are Attendant at the Cascades Lunatic Asylum? Yes.

306. What are your duties? In the morning I prepare the lavatory for the patients to wash; I then remove the night utensils, superintend the washing, &c.; I am employed 15 hours out of the 24.

307. Have you seen a copy of the printed rules and regulations? No, not during the time I have been at the Institution, viz., 14 months.

308. From whom do you receive instructions? From the head attendant. Dr. Coverdale gives the instructions in the first instance, and then they have to pass through three or four hands before they reach me, as the case may be.

309. Have you ever been employed to do work other than that connected with the Institution? At one time I was requested to take some patients into Mr. Muirhead's garden to remove some fruit trees, and on another occasion I took a patient into the garden to prepare the ground for some plants. The patients have been employed fencing in the Government drying grounds.

310. How many attendants have been in charge of them? I have been employed in the Government Garden, but at present it is a matter of impossibility to carry it on.

311. What do you recommend, then, with regard to the garden? I would recommend that it be turned over to the Training School for the boys to work it; there are not sufficient attendants to look after it.

312. Is there a sufficient number of attendants to do the household work? No.

313. How are the inmates attended to in the matter of bathing? The bathing is done in a very inconvenient manner. The head attendant is never there. A clothing rack for numerical or alphabetical clothing would be useful. Mr. Smith is always present.

314. Is the head attendant in the mess-room during the time the patients are getting their meals? No, not since I have been at the Institution.

315. Whose duty is it to be in attendance? I am always there during meal hours, as also Mr. Smith.

316. Are the clothes washed satisfactorily? No. I would strongly recommend that it be done with machines, as it is done in Sydney, Melbourne, and Adelaide. The whole of the washing could then be done in two or three hours, whereas it takes two or three days at the present time.

317. Have you ever noticed any of the officials using Government property? Yes, about eight months ago I noticed some rugs being used by one of them. Dr. Coverdale called my attention to this.

318. Was it reported? Yes.

319. With what result? I heard no more about the matter.

320. Is the person there now? Yes.

321. Are dangerous instruments such as edged tools kept out of the reach of the patients? I do not know.

322. Is there any list of prices charged for provisions supplied to the attendants? No, but there should be.

323. Have you had much experience as a wardsman? Yes, I have had 25 years' experience in Imperial Government in discipline.

324. Can you suggest any improvements that could be effected at the Cascades? Yes; the washing, as I have said, should be done by machinery, and it should be done by a sane person in a department separated from the yard. At the present time the clothing is destroyed to a great extent by scrubbing-brushes. I would also suggest an improvement in the yard, which is now very rough: some of the men wear out a pair of boots a month. The yard should be asphalted.

WEDNESDAY, FEBRUARY 22.

Examination of MR. JOHN EVENDEN—continued.

325. *By Mr. Rooke.*—Can you suggest any other improvements than those you have mentioned? Yes; without incurring any additional expense it would be a great improvement if four paupers—a good class of men—were employed, in addition to those now at the establishment. These could do the outside work that is now performed by the attendants, who have consequently to neglect the inside work. That would save two hours every morning.

326. In your opinion are the sick neglected? Yes; it cannot be otherwise, because the attendants are called away to do other work. There are not enough attendants as things are at present.

327. How many keepers are there at the Institution? There are three. Mr. Muirhead is the head-keeper, then Mr. Smith and Mr. Leary are under him.

328. Could any of these be dispensed with? Yes; there are too many keepers, and not enough attendants. One man could do the work that is now done by the three keepers, at about half the salary; the others should be made warders. At the present time, when an order is given by Dr. Coverdale, it has to pass through the whole of the keepers in rotation occasionally.

329. Practically, the head keeper and Dr. Coverdale do the same work? Yes. The head-keeper is responsible.

330. And is it unnecessary to have the two to perform the duties? Yes, quite unnecessary. I think all that is required is the Surgeon-Superintendent over the whole, one head warder, and one attendant in upper and one in the lower yard. As an inducement to the head warders to see that the work was properly done I would suggest that an addition be made to their salary of about 6*d.* per day.

331. Have the attendants to be in doors before a certain time? Yes, before 10 o'clock.

332. Does the night watchman report those who are out later than 10 o'clock? Yes, and they are liable to be dismissed. The warders should, however, be in close proximity to the building at night, and

there should be communication with their apartments by bell or telephone, so that if anything occurred during the night the watchman could call them on the spot at once.

333. Are the razors kept lying about? No; but there should be a drawer for them. One of the warders is supposed to be in attendance while a patient is being shaved, formerly two.

334. *By Mr. Gill.*—Are the wards ever left with only one attendant? Yes, frequently.

335. Do you think the patients are well attended to? No, for want of attendants.

336. Do they receive medical comforts? I never saw any issued. Mr. Smith has always been exceedingly kind to sick patients and patients in general; he is a most efficient officer.

337. Are the attendants always on duty? Yes, with the exception of one day once in six weeks, and every second night, from 5.45 p.m. until 10; otherwise they are always on duty.

338. *By Mr. Lewis.*—Is it your duty to take the patients to the recreation ground? We take it in turns; but latterly it has been impossible to take the patients out daily owing to the insufficient number of attendants. If there are duties to perform outside, the patients cannot be taken out.

339. Have any of the attendants besides yourself been taken away to do work not connected with the institution? Yes, there have been such cases.

340. Do the inmates of the Hospital work in the garden? Yes; on all occasions when labour is required of the patients they do it; but they do not work in the garden frequently. There are not enough attendants to look after them.

341. If there were more attendants would the patients be better attended to. Yes, and there would be more work done.

342. *By Mr. Gill.*—Is the recreation ground used for any other purpose? No.

Examination of MR. ALEXANDER MUIRHEAD, Head Keeper of the Cascades Asylum.

343. *By Mr. Rooke.*—You are Head Keeper at the Cascades Lunatic Asylum? Yes, and also storekeeper.

344. Have you been in your present position long? For about 20 years.

345. Are there any rules and regulations at the institution? There were rules and regulations; but for the last four or five months the official visitors have been revising them. A written copy of the old rules is hanging in the top yard, but not in the lower yard. The warders, however, know the gist of the old rules.

346. Do you think there is a sufficient number of wardsmen? No.

347. What are your own duties? Chiefly supervision under Dr. Coverdale. I also attend to the store and do all the clerical work, making out the monthly returns for the Asylum, the Lying-in Hospital, &c.

348. Does it take much time to issue the rations? Yes, it takes a great deal of broken time.

349. Are the attendants ever called away to do private work? Not by me; of course they may be called away occasionally by Dr. Coverdale.

350. Are pigs kept on the establishment by Dr. Coverdale? Yes.

351. What becomes of the refuse from the Institution? A certain quantity goes to the Training School.

352. What becomes of the remainder? I suppose it goes to the Surgeon-Superintendent; but there is really very little refuse.

353. What is done with the fat and suet from the kitchen? I dare say the cook has the benefit of that; but I am not certain of it.

354. Has the cook ever received instructions to sell it? Not from me.

355. Have any of the officers been reported to you for taking the patients' food? Yes; a long time ago one of the under wardsmen was reported for taking some soup.

356. Is the wardsmen there still? Yes.

357. When anything of that kind occurs, do you report it to the official visitors? My report goes to the Surgeon-Superintendent.

358. Do the attendants use Government stores—such as rugs? They are allowed one set of bedding, but I do not think they have used the privilege, although I have had instructions from Dr. Coverdale to issue them, and they are not confined to one set. I never issue them without authority.

359. Do you remember the case of an attendant receiving a new suit of clothes on leaving the Institution? Yes; I received instructions from Dr. Coverdale to give him a suit of clothes out of the store.

360. Is there always sufficient attendance on the sick? Yes, as far as the warders are concerned; but I have often thought that they should receive more medical comforts in the shape of nourishment. They do not get any beef tea, arrowroot, or anything of that kind.

361. Are the patients exercised regularly in the recreation ground? Yes, nearly every day, weather permitting, and when we can spare the attendants to look after them.

362. How many warders attend and look after them? I cannot send any more than two.

363. Is there much work done in the garden; this year we have done less than in previous years; but we grow a few vegetables there.

364. Are there any regular days on which the official visitors come? No; we never know until they arrive.

365. *By Mr. Dobbie.*—You occupy the same position with regard to the stores at the Contagious Diseases Hospital and the Lying-in Hospital as you do at the Asylum: does that take up much of your time? Yes; there is just as much trouble in connection with the rations and keeping the books for two as there is for twenty; I have to make up the monthly returns just the same.

366. Is there sufficient work to keep one man employed in issuing rations and doing the clerical work? Yes, nearly sufficient.

367. You and the Surgeon-Superintendent do practically the same work with regard to supervision, do you not? Yes; I attend to the working department, and he to the medical department. When he comes in the morning, if there are any sick, I report the fact to him. Practically, I do the work, and he acts as medical officer.

368. If you were a medical man, could you perform all the work that you now do, and also that done by Dr. Coverdale? No, I could not. No medical man would undertake the receiving and issuing of stores, perform the clerical work, and discharge other duties that my appointment as head keeper demands.

369. *By Mr. Gill.*—Do you keep pigs yourself? No.

370. Is it usual for the barbers to leave the razors about within reach of the patients after shaving them? No; there is always a wardman in attendance while the inmates are being shaved.

371. *By Mr. Lewis.*—Do you ever receive orders from the Surgeon-Superintendent to issue medical comforts? No, I have nothing to do with them; the Surgeon-Superintendent attends to that; all the stimulants are under his charge. If he ordered me to issue sago I would do so. Nothing in the shape of spirits or wines is issued, with the exception of a drop of rum.

372. The sum of £7 4s. 9d. was spent last year for this purpose: how was it expended? Probably in ale and rum. On four days in the year each patient is allowed half a pint of ale. This, together with the drop of rum, would make it up.

373. Who does the gardening? The patients, the attendants being in charge.

374. Do you ever send the attendants to do the gardening by themselves? No.

375. You receive a great many visitors? Yes.

376. How do you admit them? On the presentation of an order.

377. Can any of the other warders admit them on these orders? No, they have strict instructions not to do so.

378. Who gives the orders? The Chief Secretary, any of the Official Visitors, a Member of Parliament, or Dr. Coverdale.

379. Do you think the visitors interfere with the patients? No, provided they do not come in large numbers. If they do so, our object is to get rid of them as soon as possible.

380. Do you think it would be desirable to prevent the indiscriminate issuing of orders? Yes.

381. Do you think it would be better to have some recognised person who alone could issue orders? Yes; and it would be better to issue them for certain days, and between certain hours.

382. Are the attendants ever taken away from their work to show the visitors over the place? I invariably show them over myself, unless I am otherwise engaged. Of course it takes up a lot of time.

383. Can you suggest any improvements in the way of economy? No; unless a visiting doctor did the medical work as formerly. No other official could be dispensed with having due regard to good management, as the storekeeping and clerical work of the C.D. Hospital and Lying-in Hospital have been added to my other multifarious duties, and for which, I may state, I receive no remuneration.

384. *By Mr. Gill.*—What is your opinion about shifting the patients to the New Norfolk Asylum? I do not think that would be a wise course to adopt, owing to the age of the patients.

385. *By Mr. Lewis.*—Have any irregularities come under your notice? No.

386. Is the place working well? Yes.

387. *By Mr. Brown.*—Do you regard the establishment as a good winter quarter? The place is very cold.

388. Are you properly provided with fires? Yes, there is always a fire in the day-room and in the Hospital wards. We are allowed a certain quantity of fuel, which we must not exceed, and sometimes the fires are extinguished.

389. Do you think that is a proper thing to do? It is only done when the fires are not required—when it is warm enough without them. The warders have sometimes requested that the fires be put out.

390. Are the rations sufficient for the patients? Yes, the full diet is ample for those who are not doing any work. Each man receives daily 14 ozs. meat, 12 ozs. potatoes, 22 ozs. bread, 6 drams tea, 2 ozs. sugar, $\frac{1}{2}$ oz. barley, $\frac{1}{2}$ oz. salt, $\frac{1}{8}$ pint of milk; 4 oz. flour per week, and 6 oz. butter per week. There is also a spoon diet, which is merely bread and water, salt and pepper, and milk.

391. Do you not give them rice? I have no say in the matter at all. If the doctor thinks fit to put them on spoon diet, I give them what I have stated, but no rice, unless ordered by the Medical Officer.

MR. SAMUEL SMITH, *Attendant, called in and examined.*

392. *By Mr. Rooke.*—You are Attendant at the Cascades Lunatic Asylum? Yes.

393. Do you go out with the patients to the recreation ground? No; but I see them out.

394. Do you think there is a sufficient number of attendants? No.

395. Are the patients taken to the recreation ground regularly every day? No; but they are taken often. During the last two months they have been taken out on an average $4\frac{1}{2}$ days a week.

396. Do the patients get properly cared for when they are sick? Yes; but in consequence of there not being attendants enough a patient is sometimes left to himself.

397. How often are they put into the bath? Always once a week; but some bathe twice and three times a week. In the winter time, when it would be too cold for them, they only bathe when it is necessary.

398. Have you ever been employed to do work outside the establishment? No; I am always employed in the yard.

399. Do you know of any rules and regulations? I think they were destroyed two or three years ago, but I do not know.

400. Have you seen a copy hanging up in the yard? I think there are one or two pieces hanging up in the attendants' rooms; but I am not acquainted with them.

401. In the event of a new attendant being appointed, who would instruct him in his duties? I would have to do that until he was thoroughly initiated.

402. Have you a list of charges for the articles supplied from the store? No. We do not know the prices; there is no price-list of any kind.

403. You are allowed one set of bedding per annum, are you not? When I first joined we were; but I have not received any at the Cascades.

404. Have any cases of improper treatment of the sick come under your notice? I do not think so. There is always an attendant to look after a sick patient. They do not, however, get sufficient nourishment, nor are they allowed medical comforts.

405. *By Mr. Gill.*—You had a patient named Lynch, did you not? Yes, we had.

406. How long was he ill before being reported? I do not know; but Lynch was not in the Hospital long.

407. Was he left a day or two without proper attention being shown to him? Not to my knowledge.

408. Have you had reason to complain about not getting sufficient clothing and boots for the patients? Yes; they are very badly clothed, and in consequence suffer from the cold in the winter time.

409. Who has charge of the stores? Mr. Muirhead.

410. And who has charge of the medical comforts? There are no medical comforts, with the exception of a little rum, and that is in my charge.

411. Do not you think one person should keep all these? Yes.

412. How long does it take to do the storekeeper's work? I suppose about half an hour every day.

413. Do you not think that one of the under-keepers could be entrusted with the duty of keeping the stores? No; in that case he would have to neglect some of his own duties in the yard.

414. Can you suggest any improvement in the management of the Institution with a view to economy? Yes. In the first place I would do away with the two under-keepers and put an attendant on, with an addition of 6*d.* per day to his salary to see that the work is properly conducted. I believe the work would then be done more efficiently.

415. How many attendants would you put under him? The same as there are at present.

416. But would there be sufficient? Yes; there would be plenty of attendants if they were not taken away to do work they have no business to do.

417. *By Mr. Rooke.*—Is it the practice to take the attendants from their proper work and send them out? Yes, almost every day.

418. But for whom do they work, and what are they asked to do? The work is, I suppose, for the Government, but it is work not connected with the Institution; for instance, putting up a fence for the Lying-in Hospital. I have no doubt as to their being quite sufficient attendants if they were not taken away to do this work.

419. *By Mr. Gill.*—Could you manage with more old paupers at the Institution? Yes; it would be better if we had half-a-dozen more invalids.

420. Do you think that it would be a saving to the clothes if you had machinery to do the washing? Yes; and it would facilitate the work also.

421. *By Mr. Lewis.*—In your opinion would it be possible for a non-resident superintendent to do all the work? No; in my opinion it is necessary that there should be a resident surgeon-superintendent at an establishment of this kind. Some of the inmates require constant medical attendance, and it is imperative that a medical man should be always at hand.

422. *By Mr. Gill.*—How long have you been employed as attendant? For 40 years. For the first four years I was at the Hobart Hospital. Altogether I have had 40 years' experience.

AFTERNOON SITTING.

Examination of DR. THOMAS C. SMART.

423. *By Mr. Rooke.*—You were one of the Official Visitors to the Cascade Asylum until last year? Yes; I was Chairman during the year 1886-7.

424. What is your opinion with regard to the management of that Institution? Considering that the building was never designed for the purpose for which it is now used—having been an old prison, and quite unfit for a Lunatic Asylum—I should say that the management has been very fair. As an official visitor, no instance of mismanagement has ever come under my notice.

425. You are no doubt aware that there are virtually two managers at the Institution: do you think that two are necessary, or would it be possible to do without a resident medical officer? That is a question that has been discussed very often within the last few years; and to my mind a non-professional manager, with a visiting medical man, would meet requirements, and in that way it is probable that some reduction can be made.

426. Do you think it would be advisable to remove the patients from the Cascade Asylum to New Norfolk? Consideration has also been given to that question. I went fully into the subject with the Chief Secretary, Mr. Fysh, and we found that it would cost at least £15,000 for the additional accommodation that would be necessary. It then became a question whether, allowing 20 years as the probable time when the inmates of the Cascade Asylum will have ceased to exist, it would be wise to incur this expenditure for so short a time. My own opinion is, that it is not worth while.

427. From what you have seen, do you consider that the sick patients get proper attendance? I am perfectly sure that the Government has never placed any restriction upon their obtaining medical comforts; whether they get them or not is quite another question; but I have never known the Government refuse anything that is necessary for their comfort.

428. During the time you were official visitor did any actual case of neglect come under your notice—I mean when a patient has been in the Hospital? No, not that I can at this moment recall to memory. Of course, as official visitors we do not look into the medical treatment of cases; that is left to the medical officer. It would be quite out of the province of the official visitors to go minutely into the treatment of each case.

429. Have you ever performed an operation at the Institution? Yes, I passed a catheter in a case of retention of urine.

430. Was the patient relieved? Yes, he was relieved at once.

431. Should that operation have been performed by the resident medical officer? Yes. The case was mentioned to us during our visit. We always ask the question, "Are there any patients in Hospital?" This question is asked in the presence of the medical officer.

432. But why was the operation performed by you? It happened in this way. The man was reported to be ill, and I think it was stated that he could not retain his water—that he had incontinence of urine. In many of these cases that is merely the result of the bladder being over-distended. As I had had long experience in these cases, I threw down the clothes and examined the man, and instantly found that he was suffering from distension. Dr. Coverdale then went to his house for a catheter.

433. Then it virtually amounted to a consultation? Yes.

434. Was the case an ordinary one? Yes.

435. Had the man been suffering long? He did not tell me.

436. Should he have been treated as soon as possible? Yes.

437. By the resident doctor? Yes.

438. Can you suggest anything to the Commission in the way of improving the place? We have always had a difficulty to contend with in the way of improvements. The Government, although not refusing to spend money, gave us to understand that they would not be put to any large expense, but whatever we recommended in the way of small improvements would be done. Had I been able to carry out anything better I would have strongly recommended a different system of ventilation. The building is of solid stone-work, and no provision has been made for ventilation except a small tube. The matter was at one time brought under notice, and the Clerk of Works, Mr. Shield, was sent up to make the best arrangements he could, but it is still defective.

439. *By Mr. Gill.*—Do the official visitors have an opportunity of finding out any abuses that may exist during their visits? Yes, they go all round. The tabulated return which I framed when I was first appointed was found to be of the greatest possible use as a check upon abuses, because we always made up the report on the spot immediately after the inspection, and during that inspection we satisfied ourselves that the statements made were absolutely true and correct. No better guarantee could be furnished than that return.

440. Was it out of your province to enquire into the economical working of the establishment? Yes, it was out of the sphere of the official visitors; but even that was brought under our notice by the Government, and reductions were made; but we had very good reasons to go no further in this direction, because the place is so scattered. The Superintendent thought the reductions were carried out too far, and since that time he has attempted to get authority to appoint a night watchman—which the Government has not granted—permanently.

441. You stated that a resident medical man was not necessary: do you think that the patients are fit to be left without such an officer within call? Provided Mr. Muirhead was thoroughly competent to take charge of the patients—thoroughly accustomed to them—I think it is hardly necessary; but there are reasons that would almost indicate the necessity for keeping a resident medical officer.

442. *By Mr. Rooke.*—Is there an agreement between the Imperial Government and the Tasmanian Government that there shall be a resident medical officer at the Cascade Asylum? I cannot say. The Imperial authorities require that every care shall be taken of the patients, but I do not think a resident officer is specified.

Examination of MR. DANIEL GALVIN, Attendant.

443. *By Mr. Rooke.*—You are Attendant at the Cascades Asylum? I am.

444. Have you been long there? Since the 4th May, 1887.

445. Since you have been at the Institution have you seen any rules and regulations? I have seen written rules, but not the whole of the printed rules.

446. Where are these written rules? I have not seen them for some months.

447. Do you know what is done with the pigs' food? It is taken out after dinner, put into a small can, and taken away by the Training School boys. A very small portion is thrown to the fowls.

448. But that is not the whole of the refuse—what becomes of the rest? I can only speak of what comes from the tables of the Asylum. I do not know what becomes of that from the cook-house.

449. Do you know what is done with the fat, suet, &c. from the kitchen? To the best of my belief it is the cook's perquisite. That, however, is only my opinion.

450. Have you ever done, or been asked to do, any private work for the officials? I have been asked to do work for the officials occasionally. Then there is the "available" man at the gate, who is taken away to do any Government or outside work. Of course, when men are taken away it causes great inconvenience, because a sharp look-out has to be kept in order to preserve discipline.

451. Are you in the habit of taking the patients to the recreation ground? Sometimes they are taken out daily, at other times four or five times a week; but we cannot take them out regularly, because of the scarcity of warders.

452. Is there any scale of charges for the extra provisions supplied to you? Not for the attendants. We are allowed personal rations.

453. Do you remember a patient named Dent, on the 17th November last? Yes.

454. What state was he in when you saw him? He was in a terribly filthy state, being covered with excrement.

455. As an attendant, do you think the patients are properly cared for? There is not a sufficient number of attendants to do the work as it should be done.

456. Would there be enough if they were kept strictly to the work? Yes, I think there would, if you commenced at the top of the tree. There are too many masters.

457. And if the attendants were kept to the work, without being taken away, would there be enough then? Yes, they might do it then.

458. Are the patients well clothed, *i.e.*, do they get a proper supply at the right time? No; some of the patients' clothes are very much worn before renewed.

459. Do they ever have to go without boots? No; they are very destructive, and soon wear them out.

460. Your wife is manager of the Lying-in Hospital, is she not? Yes.

461. Does everything work well there now? Yes, things are in better working order now. At first there was a little difficulty.

462. *By Mr. Dobbie.*—You mentioned that the man at the gate was taken away occasionally—is that for any length of time? When he is taken away another man from the yards fills his place, so that the gate is not left without somebody being there.

463. Is he ever sent away from the Institution altogether? No.

464. Have any of the attendants been sent away? Yes; they have been sent away on Government messages.

465. At the time they were supposed to be at their ordinary work? Yes.

466. With regard to the refuse from the cook-house that is not sent away, is there much of it? No; there is not much altogether.

467. *By Mr. Brown.*—Is the meat always properly cooked? Yes.

FRIDAY, FEBRUARY 24, 1888.

THE NEW NORFOLK ASYLUM.

Examination of DR. W. H. MACFARLANE, Medical Superintendent.

468. *By Mr. Rooke.*—What is your name? William Holdsworth Macfarlane.
469. You are Medical Superintendent of the New Norfolk Asylum for the Insane? Yes.
470. How long have you held that position? I have been here since October, 1878. I was at first Assistant Medical Officer, and was appointed Medical Superintendent on 1st October, 1880.
471. In the Report of Drs. Manning, Dick, and Paterson there are a number of recommendations in reference to the improvement of the buildings: have these been carried out? Yes; the buildings have all been painted, and renovations have been effected where it has been possible to do so.
472. Will you tell the Commission what improvements are now necessary? The first thing required is a steam laundry, and proper apparatus for supplying hot water all over the male division. At the present time we have great difficulty in providing clean clothing for the patients, and two night attendants have to keep up big fires to air the sheets. We also want a better kitchen, with steam cooking apparatus. With regard to the buildings on the female side there is an utter want of classification, owing to the limited accommodation; but new buildings are now in progress to relieve the overcrowding on this side. A new building is being constructed for the acute and refractory, but it is necessary that there should be another part of the building for the chronic and dirty cases. I would also suggest that a proper large dining-room should be built to accommodate both male and female patients. This is the system adopted in England, and it has a very beneficial effect on the patients. In order to classify the patients on the male side we require a new building for the treatment of the refractory and acute cases. Again, the offices for the clerks and storekeeper are extremely deficient, and should be attended to.
473. And would the improvements suggested by you bring the Asylum up to the modern standard? Yes.
474. The Official Visitors recommended that proper appliances be obtained for extinguishing fire: has that been attended to? Yes; we only want a higher pressure of water. At present we have two fire engines in excellent working order, and all appliances, and we can get the water on to the roof of the building, but with a higher pressure we could send it all over the place.
475. Are the attendants trained to work the engine? Yes; a fire brigade was organised about 12 months ago, and they have regular monthly practice. The captain of the brigade is the carpenter, who has had experience under Mr. Maher.
476. With regard to furniture and pictures, are you pretty well supplied? We will require more pictures and a little extra furniture. I would suggest that a sum of money should be allowed me for providing recreation for the patients. In the Report on the various asylums in the neighbouring colonies it is stated that "at Gladesville and Parramatta they are allowed £250 each for the purpose of providing indoor amusements for the patients, such as theatrical and musical entertainments, billiard table, &c. At Cooma Asylum, containing only 50 patients, £50 per annum is allowed; at Newcastle, £100 per annum; and at Callan Park, containing only 150 patients, £150 per annum. These sums are at the disposal of the Superintendent. Some of the Asylums possess a band of music, the musicians being attendants and patients." We have nothing of that sort here. The Asylum should also be provided with more newspapers and illustrated papers. The sum of £400 is allowed for incidental expenses, but when we have purchased furniture, carpets, and other things that are required, there is very little left for amusements.
477. Is the clothing of good quality? As a rule, yes.
478. Is the contract for the supply of food carried out satisfactorily? Yes.
479. Have you any suggestions to make with regard to the lavatories? Yes; the lavatory in the front division should be at once improved.
480. Is the drainage in good order? Yes.
481. Have you had any cases of typhoid fever? Yes, two cases, but I believe the water was the cause of these; it is now being analysed.
482. Do the patients generally enjoy good health? Yes; we only had one death last year on the female side. There were 19 on the male side.
483. You classify the patients as well as you can? Yes.
484. Have there been any cases of injury inflicted by the patients? The only case lately has been that of a patient who broke his own leg. We had a case of poisoning this year, which was made the subject of a coronial inquiry.
485. What opportunities have you for taking the patients to hear divine service? I think we should have a chapel built here for that purpose, provided with a suitable organ. I believe the experiment has been tried in England with good effect. The time has also arrived when we should have a paid organist. Hitherto a lady has performed the work gratuitously.
486. Have you a sufficient number of attendants? No. I shall have to get an extra attendant owing to the new holiday scheme which has been instituted to relieve the warders of the irksomeness of a continued sojourn at the Asylum.
487. How are the attendants distributed? In the back yard in the proportion of 1 warder to 11 patients; at the gentlemen's cottage, 1 to 7; in the front division, where the patients are quiet, about 1 to 16. We should have more in the back division, but in the other divisions they can manage; if not, I should have the arrangement altered.

488. What number of patients are there altogether at the Asylum? 137 males and 157 females.

489. Could you provide for any more? Yes, on the male side, but not on the female side at present, without overcrowding.

490. What is your opinion as to one of the medical officers residing on the establishment? I do not think it is absolutely necessary at present. There is telephonic communication between my house and the male division, and I can be summoned at a moment's notice, living within easy call of the Asylum.

491. How often do the Official Visitors call at the Asylum? Always once, and, as a rule, twice a month.

492. Are there any special days set apart for these visits? Sometimes they tell me when they are coming, but not always. One of the Visitors has come in the middle of the night and gone round the Asylum.

493. Do you approve of the large number of casual visitors? No, decidedly not. This Asylum is deficient in one respect. As soon as a visitor is admitted he is amongst the patients, and that is not the case in any other Asylum in Australia. I have frequently been obliged to stop visitors from going over to the gentlemen's cottage. I strongly deprecate interfering with the privacy of paying patients, and I never as a rule allow visitors there. They pay for their privacy, and are therefore entitled to enjoy it.

494. Have there been any cures effected lately? Yes; last year the treatment was very successful, considering the over-crowded state of the building, and the fact that idiots and imbeciles are admitted to the Institution. In most of the other Asylums this is not the case; they are sent to separate Institutions. Female criminal lunatics are also sent here.

495. Do you consider the food supply sufficient? Yes, but I should like to vary the diet more. We cannot do this at present now owing to the defective kitchen arrangements.

496. Has the diet been altered lately? Not since the specialists suggested it. The meat and potatoes are always inspected by the Medical Officer, and the dinner is always tasted by the Assistant Medical Officer to see that it is properly cooked.

497. Do you think there is sufficient land for the Asylum and grounds? No; I am of opinion that a cricket field is required, and I would suggest that Gray and Burnett streets be closed, and that the Parsonage grounds be purchased. This ground should be secured, especially when it is remembered that a large number of excursionists visit the place. I have frequently seen boys climb on the walls to look over, and it is a source of great annoyance. The more demonstrative female patients have had to be sent in from the yard on these occasions. It was suggested in the specialists' report that this land be purchased by the Government. It would be a distinct source of revenue, because we could cultivate more land than we do at present.

498. Have you printed rules and regulations? Yes.

499. Have they been revised lately? Yes; they were remodelled in 1885, and brought up to the requirements of the Institution. They are framed and hung up in all the wards.

500. Returning to the suggestion that a chapel be built: in your opinion would the patients be improved by it? Yes; in England it has had a great moral and beneficial effect upon the patients.

501. Has the recommendation as to a clerk and storekeeper's assistant been carried out? Yes; and I would recommend further that the official visitors be empowered to condemn the old stores. At present we have to wait a very long time before they are condemned, and it is by no means a good sanitary arrangement to have them about the building decomposing year after year. They should be condemned every three months.

502. *By Mr. Dobbie.*—What is the practice now? We have to make a list of all the stores for condemnation, and when these have been accumulating for a great length of time it is a very unpleasant ceremony to go through. If the official visitors were empowered to condemn the articles, we would, of course, see that nothing was wasted. I would like also to mention the fact that the carpenter received his appointment from the Lands and Works Office. The rule states that I shall appoint all attendants, and I would prefer doing so. With regard to the new rules, I will refer to the leave of absence granted to the Medical Officers. At present Dr. Crampton is allowed 30 days, and I am allowed 35 days in the year. If I leave the Institution for three weeks the Assistant Medical Officer has to do my work. This is too great a strain for one man, and completely does away with the benefits of the holiday. I would therefore suggest that an Assistant Medical Officer be appointed for two months in the year at a salary of about five guineas per week. As the matter at present stands neither I nor the Assistant Medical Officer can derive any benefit from our holiday. There is another suggestion I desire to make with regard to the visiting days. These might be confined to two days in the week. Friends of patients can now come every day. I would name the days for these visits, which would, of course, be approved of by the official visitors, with discretionary power when the visitors come from long distances.

503. *By Mr. Huston.*—In place of the recommendations of the former Commission with regard to new buildings, what is being done? There is a new building for the male idiots, and a building for the acute cases on the female side now is being constructed contiguous to it.

504. Has recommendation No. 4,—viz., "That the grounds generally be rendered more attractive by planting ornamental trees, shrubs, and flowers,"—received attention? No.

505. Has recommendation No. 5 been carried out,—viz., "That the refractory yard for females be improved in appearance, and that it be more securely and neatly fenced"? Yes.

506. With regard to recommendation 6—"That in the back male division the yard be extended, and otherwise improved in appearance by planting trees, &c."—what is your opinion? I would suggest that some of the rooms on the south wing be taken away altogether. That has been recommended for years past. The first object, however, is to secure the land I have alluded to.

507. What has been done with regard to recommendation No. 10—"That all other wards in the back division should cease to be used for the accommodation of patients as soon as better quarters can be provided for them, and that some portion of these buildings should be entirely removed to afford the needful space for the extension of the recreation ground in that division? The wards are still in use.

508. It was also recommended "That improved bath-rooms and better kitchen and laundry arrangements and appliances be provided for": has that been attended to? The arrangements are a little better. In the female division the kitchen has been a little improved; but good bathrooms and baths have been provided in the female department.

509. Has the store accommodation been improved? The building used as a store is not altogether a suitable building for the purpose. It is very hot in summer and excessively cold in winter, and is more suitable for a hardware store. What we require is a properly constructed building fitted up for the purpose.

510. Are the matron's quarters comfortable? Yes, they are comfortable enough, except that the matron is subjected to the noises; but that, of course, will be remedied when the new building for the refractory females is completed.

511. *By Mr. Dobbie.*—What is your opinion concerning the criminal lunatics now at the Cascades Asylum?—do you think they should be removed to New Norfolk? No. My opinion is that it would be an unwise action. At present we have private lady and gentlemen patients at New Norfolk, and it is very possible that their friends would object to placing them in the same building with the class of characters now confined at the Cascades Asylum. In England there is an asylum at Broadmoor devoted solely to criminal lunatics, and in New South Wales there is a special place for them at Parramatta. Perhaps, on the grounds of economy, it would be better to transfer them here; but even in that case I would strongly recommend that they should not be mixed with other patients, even in recreation.

512. Then, a new building would have to be erected for them? Yes, decidedly.

513. Do you consider that the number of criminal lunatics is likely to be kept up? No, I do not suppose so, although insanity is on the increase all over the world. As a rule, they are not favourable for treatment. The new building at New Norfolk would have to be made very strong, the patients being just the same as prisoners, and the walls should be high. In 20 years there might be no criminal lunatics, and the consequence would be that the Government would have a building on their hands quite unsuited for other than that class of lunatics for which it was built. In all probability, as soon as the transfer was made, a private lunatic asylum would be opened, and the Government would thus be at a loss.

514. How are the patients admitted here? In three ways: first, on a Justices' order, which is signed by two Justices, and is accompanied by a medical certificate; second, on a private order, which has two separate medical certificates; and third, on the Governor's warrant. We have none of the latter class now,—they are sent to the Cascades; but we can admit them if necessary.

515. Do you think that any improvement could be made in the mode of sending lunatics to the Asylum? No.

516. How are patients discharged? By the Official Visitors. The criminal lunatics are, however, discharged on the Governor's warrant. In the case of a private order, the persons signing the document can take the patient out, provided he is not dangerous or suicidal.

517. *By Dr. Huston.*—What becomes of your poor patients when they are fit to be discharged? If they are very poor when they are sent out, I give them a little money.

518. Is that provided by the Government? I sometimes give it out of my own pocket, and sometimes from the petty cash.

519. What provision is made for sending them to their homes? I write to the Administrator of Charitable Grants, requesting that the patient be removed, and it is generally done without any delay to speak of. I am of opinion that there should be a sum set aside specially for this class of patients leaving the building. The petty cash is not sufficient for this purpose.

520. I believe you have lately applied for a steam engine to have the wood cut up in that way instead of by hand? Yes; the steam engine should be purchased at once. In the first place, wood-cutting is not a beneficial occupation for patients who are recovering from mental disease; they might be employed with far more beneficial results in agricultural work and in beautifying the grounds. When we get the steam laundry the steam from that will work the saws. But, for the reason I have mentioned, it is very desirable that a small steam engine be purchased immediately for wood-cutting.

521. Are the attendants in uniform? Yes.

522. *By Mr. Lewis.*—How many kitchens are there in the whole establishment? One at the gentlemen's cottage, one in the main building, one in the female division for the nurses, one in the ladies' cottage, and one at the farm for idiots.

523. How many cooks are employed? Three.

524. Would it be possible to include all these kitchens in one? Yes. My proposal is to have one central kitchen, with proper steam-cooking apparatus. Then one cook can do the whole of the work, and everything will be properly cooked.

525. Have you had any trained attendants brought into the Hospital? Yes. There have been trained attendants from England on the female side, but I cannot say that there is any decided benefit in obtaining them. Every asylum is constructed on a different principle, and I believe there is no psychological school for training the nurses in England. It is better to train our own nurses. Specialists decidedly deprecate trained attendants, who soon become dissatisfied.

526. Are you satisfied with your present working staff? Yes.

527. How many hours a day are warders on duty? Twelve; from 6 A.M. to 6 P.M., with time for meals.

528. Is there sufficient employment about the farm and the establishment for all those who are able to work? Yes; but if we had more land we could do more work, particularly if we get the steam power for cutting wood.

529. Are copies of the rules and regulations given to the warders and officials? The rules and regulations are hung up in the wards. We applied some time ago to have these rules properly printed. At present the doctors', matrons', and attendants' rules are printed together, and this is a very injudicious arrangement, because I do not consider the attendants should know what our rules are.

530. Considering that the discharging of patients is in the hands of the official visitors, do you think that the visits are made often enough? Yes.

531. Would it not be possible for a patient to remain in the Asylum for almost a month after a cure has been effected and he is fit to be discharged? In a case of that kind I would arrange with the patient's friends to come for him, and give the official visitors two days' notice.

532. Can one Official Visitor grant a discharge? No; there must be two.

533. Do you consider that you can get a properly qualified medical officer to assist in the work during the leave of absence granted to you and Dr. Crampton for five guineas per week? Yes. There are often several in Melbourne who have to study psychology for three months, and I think I could always make arrangements to have the duties performed for £50 a year.

534. Are there any rules for admitting visitors, or do you use your own discretion? No; visitors are admitted just the same as they are in other asylums; but it is a recognised rule that they are to be kept out of the way of dangerous patients.

535. None of the attendants are allowed to admit patients without your order or Dr. Crampton's? No, certainly not. They have never attempted to do so.

536. Who orders patients to be sent into the Cascades Asylum from New Norfolk? They are sent there on a Governor's warrant. I apply for this warrant when I see a very dangerous case, or one addicted to unnatural offences, and for this reason—the Cascades Asylum has more single room accommodation, which is imperatively necessary in cases of this kind.

537. Is the new fence that is being built high enough? No, it should be higher. But in my opinion the whole of the iron fences should be taken down and a brick wall 10ft. high substituted.

538. *By Mr. Gill.*—As a professional man do you consider that the Cascades Lunatic Asylum could be managed with a superintendent and a non-resident medical officer? No. In an establishment where there are criminal lunatics it would be highly dangerous to be without a resident medical officer in charge.

539. *By Mr. Lewis.*—What recreation do the warders get? They get 20 days' leave of absence in the year; otherwise they get no recreation, except when they go out or play with the patients.

DR. JOHN S. CRAMPTON, *Assistant Medical Officer, Hospital for the Insane, New Norfolk, called in and examined.*

540. *By Mr. Rooke.*—Your name is John S. Crampton, and you are Assistant Medical Officer for New Norfolk Hospital for the Insane? Yes.

541. How long have you been in that position? Ten months.

542. What experience did you have before that time? I was Medical Assistant at the District Asylum, Ennis, for two years; Medical Assistant at Richmond Asylum, Dublin, two months; Assistant Medical Superintendent at Newcastle-on-Tyne City Asylum, four years; and temporary Superintendent at Ennis District Asylum six months.

543. From your experience can you suggest any improvements to the Commission? In the first place, the idea of the Asylum is more or less lost on account of its closeness to the public roads.

544. Do the patients get well fed? They do not get a sufficient variety of vegetables; potatoes are the only vegetables supplied to them.

545. Do you consider that there is sufficient land for the Asylum? No; I am of opinion that more land should be purchased.

546. Have you a sufficient number of attendants? Yes.

547. Do they perform their work properly? Yes, to the best of their ability, and considering that we are not able to draw trained attendants from other Asylums.

548. How often do the Official Visitors go through the Asylum? Once a month, and sometimes twice.

549. As a rule, do you know when they are coming? Yes; but they have come unexpectedly.

550. Do you consider they come often enough? Yes.

551. Do you think the patients have a fair chance of recovery? Yes; but at the present time they suffer from a want of classification.

552. What is your opinion with regard to the number of casual visitors who call at the Asylum? My opinion is that a large number of visitors is prejudicial, not only to the working of the establishment, but also to the recovery of the patients; and for these reasons I would discourage indiscriminate visiting. They should only be admitted by the order of the Chief Secretary, at the discretion of the medical officers.

553. What is your opinion with regard to the patients cutting wood? Wood-cutting is not a beneficial occupation for them, and I would recommend that the work be done by steam and the patients put to other work.

554. During the leave of absence allowed to the Medical Superintendent you are left in sole charge : do you not find the duties very onerous? Yes, I must remain about the establishment all the time.

555. Are you of opinion that another medical officer should be appointed to assist during the time Dr. Macfarlane and you are away? Yes, such an officer would be very useful.

556. Are you of opinion that a steam laundry is required? Yes. At the present time a large amount of washing is left undone in consequence of there not being a steam laundry.

557. Can you suggest any other improvements? Yes; I would suggest that a central block of buildings for a kitchen and dining hall, with bath-rooms, be erected. They are urgently necessary.

558. Are the patients in the habit of assaulting one another? Very rarely; and when they do, the warders, who have entire control over them, put a stop to it at once.

559. Then you consider that the establishment is working satisfactorily? Yes. I would recommend that a chapel be built for religious services. It would have a most beneficial effect upon the patients. At present services are held and prayers read in the dining-room on the female side, or the recreation-room.

560. Is there room for holding services? Yes, we have no difficulty, but there should be a separate building for the purpose.

561. Are the patients attentive? Yes, and I think they appreciate the services?

562. *By Mr. Lewis.*—Are the vegetables grown at the farm for the use of the patients? Yes, but only sufficient to supply the private cottages.

563. Is the milk obtained from the farm sufficient to supply the whole institution? Scarcely.

564. Do you go outside for it? No; the use of it is restricted.

565. There is an item in the Estimates for a milkman—what are his duties? He attends to the cows. He has another man farming under him, and he has two patients under his control on the farm.

566. When you send patients to the farm does a warder accompany them? Yes, and there is always a man about the farm.

567. You stated that the kitchens should be centralised: in your opinion would there be a saving effected if this were done? Yes, there would not be so many cooks required.

568. Could you then dispense with the services of any of the attendants? Yes, I believe one or two attendants could then be dispensed with.

569. *By Mr. Dobbie.*—Will you explain what you meant when you remarked that the idea of the Asylum was lost? Patients are sent to the Asylum to be secluded, but the public roads being so close to the establishment this is not the case.

570. Are you of opinion that these streets should be blocked up? Yes.

571. Will you enumerate the streets? The roads should be closed in Burnett-street from Grey-street to George-street; and Grey-street should be closed as far as Humphrey-street. I have read the recommendation made by a former Commission, and approve of it. I would recommend that the land be purchased.

572. Is there sufficient ground for the use of the asylum at present? No; we have not a cricket ground, and the ground utilised for farming is not sufficient.

573. Do you think the purchase of the land you have mentioned and their additions to the Asylum absolutely necessary for the welfare of the institution? Yes.

574. Would you approve of certain days being fixed for casual visitors? Yes, two days in the week would be quite sufficient; and at any other time, except in cases of emergency, I would not admit casual visitors.

575. Is there sufficient accommodation for the attendants? It is extremely meagre on the male side, but it is fair on the female side; they are, however, obliged to use the kitchen for a sitting-room. If their bedrooms were larger they would be able to use them more or less for that purpose. In other asylums there are large dining-rooms which are used as sitting-rooms.

576. Do you consider that the females should have a dining-room for that purpose? I consider that there should be a common dining-hall for males and females. Nothing tends more strongly to promote discipline than to allow the male and females patients to dine in the same room. The system acts most beneficially.

577. Is the bedding of the patients regularly washed? No. I am told that some of the blankets have not been washed for years owing to the want of washing accommodation. If this were improved we would be able to give the patients sheets.

578. *By Mr. Gill.*—Are the attendants kind to the patients as a rule? Yes. If a patient complains of ill-treatment investigation is made immediately, and both the attendants and patients are questioned.

579. Do you ever have any concerts at the Asylum? Yes, sometimes they are given voluntarily, and occasionally they are paid for. Word is sent to the Chairman of Official Visitors, and he gives the order.

580. Have you any patients who are addicted to unnatural offences? No, not to my knowledge. I do not believe that anything of the kind occurs.

581. Have you any means of ascertaining these cases? Yes; the attendants report them to the doctor immediately. We have single rooms, where we place patients if there is any doubt.

582. *By Mr. Brown.*—Who works the garden for the use of the Institution? It is worked by the gardener and the patients.

583. What is done with the produce? The greater portion of it goes to the private cottages.

584. Do the other patients get any of it? Only occasionally.

585. Is any of the produce sold? Not to my knowledge.

586. Have you ever known any of the produce to be sent away as presents? No. As a matter of fact if there were sufficient vegetables grown to supply the other patients they would be provided with them.

587. *By Mr. Rooke.*—From your experience in other Asylums, do you consider that there is a fair number of cures effected at the New Norfolk Asylum? Yes; if the present per-centage of recovery is lower here, it is entirely on account of the number of chronic cases compared with other Asylums.

588. Have there been any cases of recovery among the paying patients lately? Yes.

589. Is it desirable to allow visitors to go through the private cottages? No; such a practice is extremely improper except in the case of relations or friends. Visitors who come merely from curiosity are not allowed to see the paying patients. The head attendant has express instructions to that effect.

590. Who accompanies the casual visitors? The head attendant, and his time is constantly wasted in this way.

AFTERNOON SITTING.

DR. THOS. GRAY, *Official Visitor, New Norfolk Asylum, called in and examined.*

591. *By Mr. Rooke.*—You are Official Visitor for the New Norfolk Asylum for the Insane? Yes.

592. How long have you held that position? Six months.

593. How often are the official visits made? Certainly once a month, with notice, and occasionally without notice.

594. Do you approve of casual visitors in large numbers? No; I think it is a most objectionable practice, and not conducive to the success of the medical treatment; it should therefore be discouraged in every possible way.

595. From your visits to the Asylum, have you anything to find fault with with regard to the management? No; I am of opinion that it is very well managed.

596. Do you think once a month is often enough for the official visits? Yes, with the intermediate, or "surprise" visits which we make; in order to see if there is any laxity.

597. Do you consider that the patients are well looked after in the way of food and clothing? Yes, they are particularly well cared for. We hear complaints sometimes, and enquire into them, but there is generally no ground for complaint.

598. As to accommodation, are you of opinion that there should be more land bought? Yes; and I would also suggest that no more buildings should be erected on the portion of land now enclosed. The Government should, in my opinion, acquire more land as soon as possible, so as to be able to give the patients greater facilities for recreation. At present they have no recreation ground at all.

599. Can you suggest any improvements? It would be very desirable to have a steam laundry and steam power for cutting wood. The men who are employed in the wood-yard could then be advantageously occupied in decorating the grounds and agricultural work.

600. Do you approve of a small sum of money being specially granted for amusements, pictures, &c.? Yes; I think such a sum would be spent with great advantage, and would be conducive to the patients' recovery.

601. During the usual leave of absence, which is granted to the medical officers, one doctor is left in sole charge of the establishment. Do you think the work is too heavy for him? Yes; because it is necessary that one man should be always on the building.

602. Are you of opinion that a temporary medical officer is necessary to assist the officer left in charge? Yes.

603. So far as your experience goes, do you consider that the officers and attendants do their duty? Yes; during the whole time I have been Official Visitor I do not remember the Medical Superintendent calling my attention to one case of misconduct or neglect, with the exception of a case of carbolic poisoning; but the person implicated was asked to resign in consequence.

604. Have any cases been brought under your notice of the patients injuring one another? No, no cases of importance.

605. You are also Official Visitor to the Cascades? Yes.

606. Do you consider that a resident medical officer is necessary for that establishment? I am of opinion that a medical man residing at Hobart, within telephonic communication with the Asylum, would be quite sufficient for the medical care and treatment of the insane at that institution.

607. Do you think that the patients are well cared for? Yes, as well as they can be, having regard to the unsuitableness of the building. The general management is as satisfactory as possible under the circumstances.

608. As Official Visitor can you make any suggestions? If it be possible to get a piece of land in conjunction with the New Norfolk Asylum, where a building could be erected for the criminal lunatics, then the same staff would perform the work of the two institutions, and thus save the expense of the Cascades Asylum.

609. Would that not have an effect upon the paying patients? I do not think it would.

610. What is your opinion concerning the number of visitors to the Cascades Asylum? That is becoming a very serious matter. Too many authorities are issuing orders, and it should be put a stop to at

once. At present the Asylum is being made a show place. There should be some regulations for visiting. As an Official Visitor I must also draw attention to the gross irregularities existing in connection with one patient named De Bomford.

611. Relate the particulars concerning his case? He is allowed more liberty than the other patients, living in special apartments, and receiving benefits which, in my opinion, are absolute luxuries, and totally unnecessary for his disease. Special meals are brought to him by his relations. As a matter of discipline this course cannot be too strongly condemned. In any institution it would be subversive of all discipline.

612. Is there anything like that at the New Norfolk Asylum? No.

613. *By Mr. Gill.*—Do you know a patient at the Cascades named Rew? Yes; he is fit to be discharged at any date, and has no right to be there. The Official Visitors have reported his case to the Government.

614. Has it ever been reported to you that patients have been ill-treated at the New Norfolk Asylum by the warders? No, never.

615. Do you think that when a man has lost his reason he should be harshly treated? No; any man who has lost his reason should be treated with all possible kindness, and not as a prisoner. I do not think it right that a man who is not a prisoner should be sent to the Cascades Asylum. It is a very bad precedent to make. If a patient becomes very demonstrative there should be some means of keeping him at New Norfolk.

616. *By Mr. Rooke.*—What cases have been sent there? Two or three cases of unnatural offences and violence. I am entirely opposed to sending them to the Cascades, because any act committed during their lunacy is not a criminal one. There are cases which may become exceedingly obnoxious here; but if they were always sent to the Cascades there is the possibility of making that institution a permanent building instead of a temporary one.

617. *By Mr. Dobbie.*—Do you consider that De Bomford should be in the Cascade Asylum? Yes.

618. *By Mr. Gill.*—Do you think that a special Board of Enquiry should be appointed to enquire into De Bomford's case? Yes, I certainly think that special enquiry should be made into his case.

619. *By Mr. Lewis.*—Is it possible for a patient to be detained at New Norfolk Asylum long after recovery? No, I have never known a case where a patient has been detained longer than necessary.

620. Are all these cases well investigated? Yes. When patients are reported to be fit to be discharged they are brought into the Medical Superintendent's office, and examined by the Official Visitors, and their sanity proved. They are also questioned as to the treatment which they have received while in the Asylum, and asked whether they have any charges to make against the medical officers. I have never heard an answer given in the affirmative.

621. Do the Official Visitors make enquiries into the other cases? Yes, as we go through the wards.

622. Do you think it would be possible for a patient to recover, and not be reported by the Superintendent, and the case escape the notice of the Official Visitors? No.

623. Is there any safeguard against this? Yes, the Official Visitors examine into each case. I might here mention that I make visits to the Asylum during all hours in the night, and have never found anything other than satisfactory.

624. How do you account for the expense per head being so much higher at the Cascades Asylum than it is at New Norfolk? I presume there is better management in the one than in the other; and the smaller number of patients may have something to do with it. The patients at the Cascades require more attention also, and a greater number of warders.

625. Which land, in your opinion, should be purchased for the extension of the New Norfolk grounds? The land opposite to the Asylum should be acquired, and Burnett and Grey-streets closed, the former street between George and Grey-streets, and the latter street as far as Humphrey-street. The sooner this land is acquired by the Government the better, and the cheaper it will be in the long run.

626. Is the farm sufficiently large to give employment to the patients? No.

627. If a patient is sent to the Cascades on a Governor's warrant from the gaol, would he be transferred to New Norfolk at the expiration of his sentence, or would he be retained at the Cascades—that is, if he had not recovered? That would depend upon the report of the Medical Superintendent. He would be sent here as a pauper lunatic.

628. Should the man Meehan be retained at the Cascades? No; cases like his should not be retained there. I may tell you that I moved that a special report should be taken from the Medical Superintendent as to Meehan's present condition.

629. Why a special report? We cannot certify as to his insanity because we have not the same opportunities of judging as the Medical Superintendent.

630. Is there a visitor's book at the two asylums? There is no visitor's book at New Norfolk, but I believe there is one at the Cascades Asylum. It is, however, very irregularly kept.

631. Would it not be advisable for the head attendant to keep a record of the names of visitors? Yes.

632. Have they any rules and regulations at the Cascades Asylum? We are revising them now, and we hope that they will be printed ready for our next visit to the Asylum.

633. Do you consider that the patient De Bomford is fit to do work in the stores, and carpentering work? Yes, I think he is fit to do any kind of work, and should be utilised.

634. He does a quantity of fret-work; do you consider that that should be sold to defray the cost of keeping him? I believe it is sold, and the money goes into his own pocket. I may mention, with regard to this patient, that a letter has been sent to the Chief Secretary requesting that he will grant the Official

Visitors an interview, in order to learn why he is treated different to the other patients. One of the other patients has remarked that while De Bomford was treated to so many luxuries he would not care for discipline.

635. What is your opinion with regard to the employment of paupers at the Cascades—do you think some benefit would be derived from employing a greater number than there are there at present? No; they are perfectly useless, and are under no control, doing as they like, and getting drunk when they have an opportunity.

636. *By Mr. Gill.*—What experience have you had as a specialist among lunatics? None; I have never been in medical charge.

637. *By Dr. Huston.*—Do you approve of the designs for the improvement of the Asylum? No; the idiots' asylum is too close to the residents' houses, and it is overlooked by a public-house. For the same reasons I disapprove of the site for the new building for the acute, chronic, and dirty cases on the female side. I am also of opinion that to build a place for the male dirty, acute, and chronic cases immediately in front of the gentlemen's cottage, as per plan, would be a gross piece of injustice to the gentlemen patients. The small piece of ground in front of their cottage should on no account be taken from them. I would not support any further extension of buildings within the present walls.

638. *By Mr. Brown.*—How many Official Visitors are there? Three.

639. Do you visit the Asylum at stated periods? Yes, for administrative purposes.

640. Are the administrative duties carried out always by the whole of the Visitors? Yes, except on one or two occasions when we have not had a quorum.

641. Do you always make it a practice to go through and see the patients at their meals? Yes; and we have always found everything satisfactory.

642. Do you think that the present position of the Asylum is a good one? Yes, the site is a most satisfactory one. I might here mention, with regard to the building, that there is no hospital in connection with this asylum, and it is necessary that there should be one.

643. *By Mr. Gill.*—How is the dispensing carried out? By contract; and I think it works very satisfactorily.

644. *By Mr. Brown.*—Can you suggest any improvement in the warders' uniforms? Yes; at the present time they are anything but a credit to a Government institution, and I would suggest that a better fitting article be supplied, and of better quality. More attention should be paid to the clothing of the male staff.

MR. GEORGE HILL, *Head Attendant, called in and examined.*

645. *By Mr. Rooke.*—What are your duties? To look after the other attendants.

646. Do you hear of any friction occurring between the patients and the warders under you? No; complaints are very rare, and are at once reported to the Medical Superintendent.

647. How long have you been at the Asylum? Twenty-six and a half years.

648. As head attendant you go round with the casual visitors? Yes, and it takes up a great deal of my time.

649. Do visitors, in large numbers, have any effect upon the patients? Yes; they make the patients excited, and the practice should be discontinued as far as possible.

650. What becomes of the refuse from the tables? It is taken to the farm for the pigs.

651. Do the patients get the vegetables from the farm? Yes; the cottages get the best part of them. There are not sufficient grown for the whole establishment.

652. Have you any suggestions to make?—are there any complaints? We only require more space, so as to classify patients. The chances of recovery would then be greater.

653. *By Dr. Huston.*—Is the produce from the farm used exclusively for the establishment? Yes.

654. What becomes of the pigs that are fed there? Some of them are taken to Bridgewater and sold; others are killed and issued to the patients. There are days for a general issue of pork to the whole establishment; otherwise it is regarded as an extra.

655. Do you think that the vegetable garden is large enough for the institution? With the amount of labour at our disposal it is large enough; we have not enough labour to cultivate more.

656. Is there enough land to supply fruit and vegetables all the year round? No; we are supplied with fruit during the season by private parties.

657. Do the patients get plenty of milk? Yes.

658. What is your opinion with regard to the wood-cutting? I think it should be done by steam, and the patients taken to do more beneficial work.

659. *By Mr. Gill.*—What amusements do the patients have? Bagatelle, draughts, dominoes, and cards, and occasionally, but not often, we have a concert; also a dance once a fortnight.

660. Are the concerts beneficial? Yes.

661. When there are religious services performed are the patients benefited? Yes; they always go when the bell rings, and are invariably very quiet during service.

662. Do you think that if you had more labour you could produce enough vegetables for the whole establishment? Yes.

MR. JOHN BROWNELL, *Storekeeper, called in and examined.*

663. *By Mr. Rooke.*—You are Storekeeper at the New Norfolk Lunatic Asylum? Yes.

664. How long have you been at the Institution? Five years.

665. What are your duties? I give the stores out as required, attend to their receipts and issues, and keep the accounts, which I render from time to time; I have the whole supervision of the stores. The following details are also comprised in my work, viz.—Daily strength book, daily issue of provisions and stimulants, daily extra sheets and diet rolls, correspondence, daily receipts of cash and despatch of receipts, cash entries (in two books), provision accounts, entries of receipts and issues of stores, provision returns, cash returns, stock purchases and sales, salary abstracts, paying salaries, daily attendance on the Medical Superintendent, receiving correspondence and instructions, seeing the cash put away, and many other items inseparable from a large establishment.

666. How are the vegetables from the garden issued to the patients? They are sent by the gardener to the cook.

667. Who has charge of the medical comforts, wines, brandy, &c.? I have.

668. Is there a considerable quantity used? No.

669. Do you consider that the present store is fitted for the purpose? No; it is excessively hot in summer and cold in winter, owing to the material from which it is constructed (corrugated iron), and it has a depreciating effect upon many of the articles kept there. I am of opinion that a new store is necessary.

670. Can you make any suggestions with regard to the condemned stores? Yes; they are kept too long. We have an accumulation of over four years at present. We are not allowed to destroy these things unless the Colonial Storekeeper condemns them. Some correspondence has taken place lately with regard to the matter; but, as a matter of fact, they are not yet destroyed.

671. Are these very offensive? Yes; they are packed in a small compass, and having been accumulating for so long a time through the different seasons they are very offensive. I am of opinion that six months is quite long enough to keep them.

672. *By Dr. Huston.*—How often do you send a report of the articles to be condemned to the Colonial Storekeeper? We have never been required to send a report. There has been no proper system. I had never sent in a list until we wrote some time ago to the Colonial Storekeeper, and he asked for one.

673. Do you not think that it would have been better to send in an official report of the articles for condemnation? Perhaps it would have been better.

674. How do you test the medical comforts? Dr. Crampton tests them from time to time.

675. Have you ever condemned them? Yes, on one or two occasions. We sent back some ale about 18 months since, which went bad owing chiefly, it is thought, to the heat of the store. Since that the supply has been very good.

676. Are the groceries supplied in a satisfactory condition? Yes.

677. How is the butter given to the patients? Weekly; fresh to the lady and gentleman patients; potted to the others.

678. Is your meat supply good? Yes; the present contractor is performing his contract fairly, and the meat has only been rejected once or twice.

679. Can you make any further suggestions? Yes. In reality we have no office, and I have to write up my books in a very small room, which is very cold in winter. Besides this we are subjected to the noises and other inconveniences from the patients, who frequently come and open the door. This want of office room for myself and assistant has been reported to the Official Visitors, but nothing has been done. Myself and assistant occupy as an office the only room available. In addition to what has already been said, this room is too small, and very badly lighted and ventilated. The noise and interruptions from the patients and other sources are at times excessive, rendering it often times a matter of difficulty to fix the mind on the work in hand so as to ensure correctness and expedition. There is also another matter which I desire to bring under your notice, and that is with regard to contracts. I am of opinion that the Medical Superintendent should be considered by the Board of Tenders in Hobart, and consulted as to how previous contractors have carried out their contracts. I do not complain of the quality of the articles supplied, but of the trouble caused by articles being rejected and others having to be obtained.

680. *By Mr. Lewis.*—Do you think you could manage well with a smaller stock of goods in the store attached to the Asylum. No. We are often inconvenienced by not having a sufficiency of goods in the stores through limited means.

681. *By Mr. Brown.*—Are the books ever inspected? Yes; stock is taken every year, and a return of provisions is sent down every month. The stock in the stores is taken every year by the Audit Department, who also examine the books and check the balances. A return of provisions, stimulants, fuel and light, cash and numerical strength, is sent to the Colonial Auditor every month.

DR. CRAMPTON, *Assistant Medical Officer, re-examined.*

682. *By Mr. Gill.*—What is your opinion with regard to the present system of keeping the old stores so long without condemnation? I consider it most preposterous.

683. Having had so much experience amongst lunatics, do you think that a resident medical officer is necessary at the Cascades Asylum? Yes; but he should be allowed private practice.

MISS SELINA ALEXANDER, *Matron, New Norfolk Lunatic Asylum, called in and examined.*

684. *By Mr. Rooke.*—How long have you been at the asylum? A little more than four years.

685. What are your duties? I have charge of the whole female division.

686. Is the new building which is in course of construction sufficient for the classification of the patients under your charge? I do not know; but we are very much overcrowded at present.

687. Is the kitchen accommodation sufficient? No; the washhouse and laundry are also very small, and not adequate for the requirements of the place considering that we have to wash for the whole building. It could be done more satisfactory with better appliances and more room.

688. Do the attendants give general satisfaction? Yes; but sometimes we have a little difficulty in securing suitable attendants.

689. From your experience can you suggest any improvements to the Commission? Yes. In the first place there should be better sleeping accommodation for the attendants as soon as possible. Some of them sleep two and three in a room, quite close to the patients. They have also to take all their meals in the kitchen, which is also their sitting-room. It is necessary that this should be altered.

690. Do you think the visitors have a bad effect upon the patients? No, I do not think they do them any harm.

691. Do visitors go over the cottages? As a rule they are confined to the main building.

692. Do the attendants ever complain about their diet? No, they do not complain; but there is a lack of vegetables, and we get no fruit. We have applied for it, but there is not sufficient grown.

693. Do the paying patients get a good supply of vegetables? Yes, but the nurses do not; they only get potatoes.

694. Does the female portion of the Asylum work smoothly? Yes.

695. Have any of the attendants been reported for violence towards the patients? Only once within the last four years.

696. Is there sufficient bedding for the patients? No; we have great difficulty in obtaining either mattresses or the hair to make them.

697. Have you applied for more? Yes, we are constantly applying to the storekeeper.

698. Are the patients warm in winter? Yes.

699. *By Mr. Lewis.*—What hours do the nurses have on duty? From 7 a.m. till 6 p.m. on one day and from 7 a.m. till 8 p.m. on the next day.

700. What hours are they allowed out of the Institution? Every other evening from 6 till 9 in winter, and from half-past 6 till half-past 9 in summer. They also have 20 days' leave of absence every year.

701. Are there special night nurses? Yes. They receive an extra £5 a year each.

702. Have you enough work to keep the patients employed? Yes; washing is always going on.

703. *By Mr. Dobbie.*—Have you a sufficient number of nurses? Yes.

704. *By Mr. Rooke.*—There are some criminal patients in the female division: do they interfere in any way with the other patients? No, but they are mixed with the other women, without distinction.

705. What religious services are held at the Asylum? There is a Church of England service held every Sunday, and a Roman Catholic service every second Sunday.

706. Do you think the services are calculated to do good? Yes, they do a little good sometimes.

707. Do you think it is desirable to have a chapel built? Yes; I believe it would have a most beneficial effect on the patients.

708. *By Mr. Brown.*—What check is there upon the night nurses? Their own report.

709. *By Mr. Rooke.*—Have you any further suggestions? It would be better if our requests were attended to more promptly than at present.

MR. WILLIAM H. BENNETT, *Senior Attendant, New Norfolk Asylum, called in and examined.*

710. What position do you hold? I am Senior Attendant in charge of the back yard.

711. How long have you held that position? Four years and four months.

712. Do the patients ever attack one another? Sometimes, but I have no difficulty in keeping them under control. They would be better if classified, but want of space prevents that.

713. Would the patient have a better chance of recovery if properly classified? Yes, I think so.

714. You are in constant supervision over them? Yes.

715. Have there been any cases of unnatural offence within your knowledge? There was a case about two years ago; but the offenders were sent to the Cascades Asylum. Since that time nothing of the kind has occurred, and I always keep a sharp look-out.

716. How many epileptic patients are there in your division? Six by day and eight by night.

717. How are they cared for? They occupy a ward by themselves, and have special attendants over them, who treat them with the greatest care.

718. Is there a night attendant? Yes.

719. What check have you upon the night attendants? They are obliged to make written reports every morning. If anything special occurs during the night, such as a patient having many fits together, the night attendant calls me immediately. The front and back night attendants also peg a tell-tale clock every hour.

720. How many patients have you in the back yard whom you consider dangerous characters? Twelve. We pay special attention to them.

721. The class of patients under your care require more attention than any of the others, do they not? Yes, they are very filthy in their habits.

722. Do you experience any difficulty in managing them? No; since I have had an extra attendant I manage very well.

723. Have any serious accidents occurred since you took charge of the yard? No; there have not been any serious accidents for the last four years, whilst I have been actually in charge.

724. Have you a better means of classifying the patients in your part of the building? Yes, at night time. During the day they are all put together.

725. How many idiots have you under your care? Four at night, two in the day time. Two sleep in separate rooms in the back yard.

726. *By Mr. Lewis.*—Do they go into the infirmary during the day? Yes.

727. Is the bath accommodation sufficient? No. We have 65 patients and only two baths.

728. How often do the medical officers visit your part of the institution? There are two official visits every day—one in the morning and one in the afternoon, also one at night. Dr. Crampton also calls several times some days.

729. Is there always a doctor within call? Yes.

DR. W. H. MACFARLANE, *Medical Superintendent, re-examined.*

730. *By Mr. Lewis.*—How many idiots are there at the cottage? Six altogether. The proper number is eight, but there are two patients in such a condition that it is not advisable to send them over yet. As soon as they are better I will do so.

731. The epileptic patients have to be seen at night, have they not? Yes.

732. And don't you think the present arrangement has a very bad effect? Yes; but it can only be remedied when the new building is ready for occupation.

732A. Who are the clergymen attending the Institution? The Church of England clergyman is the Rev. W. W. F. Murray, M.A., and the Roman Catholic clergyman is the Rev. B. J. Murphy.

732B. How was the clergyman of the Church of England appointed? By the Synod.

732C. Does he receive a salary, and from what source? Yes, from the Synod.

732D. Can you give a return of the number of his visits to the Institution on Sundays during the past year, and also one of other clergymen who have attended in his place? Return attached. (*Vide Appendix.*)

MR. JOHN WHIFIN, *Gardener, New Norfolk Asylum, called in and examined.*

733. *By Mr. Rooke.*—You are the Gardener in charge of the New Norfolk Asylum garden? Yes.

734. What assistance do you get? I have only one regular man.

735. Would the amount of vegetables be increased with more labour? Yes.

736. What extent of land could you cultivate? About three acres.

737. If some of the patients who are now employed cutting wood were sent to the garden would they be useful? Yes, but I would require another attendant to look after them.

738. What method is adopted with regard to serving out the vegetables and fruit grown in the garden? I serve them out myself to the ladies' and gentlemen's cottages twice a week. A portion goes to the cook-house.

739. Are there any sold? No.

740. *By Mr. Brown.*—Are you a professional gardener? Yes.

741. Do you think that the present area of land is sufficient for the garden? A little more land is required; but with more labour I think I could supply the Asylum with vegetables freely from the same area.

742. *By Mr. Lewis.*—Do you have anything to do with the farm? No; my sole duty is with the three acres.

MR. EDWARD BROMFIELD, *Attendant in charge of the Gentlemen's Cottage, New Norfolk, called in and examined.*

743. *By Mr. Rooke.*—How long have you been in your present position? Ten years.
 744. Do you ever hear any complaints from the patients at the gentlemen's cottage? No.
 745. Do they get vegetables every day? Yes. They get three courses for dinner.
 746. Are all the beds occupied? Yes.
 747. How many patients have you? Eighteen.
 748. Do they quarrel amongst themselves? Very rarely.
 749. Have you enough attendants to cope with them if anything of the kind did occur? Yes.
 750. Do the medical officers visit them regularly? Yes.
 751. What amusements are provided? Cards, bagatelle, draughts, and chess.
 752. Are casual visitors allowed to go through the cottage? No; the patients are kept as quiet as possible.
 753. As a rule are the patients contented? Yes.
 754. Are they taken out for walks? Yes, nearly every afternoon. They also play quoits, skittles, and cricket.

MONDAY, FEBRUARY 27, 1888.

THE HOSPITAL FOR CONTAGIOUS DISEASES.

DETECTIVE JOHN DELANEY, *City Police Force, Hobart, called in and examined.*

755. *By Mr. Rooke.*—Your name is John Delaney, and you are Detective-Sergeant in the City Police Force, Hobart? Yes.
 756. Have you occupied that position during the time the Contagious Diseases Act has been in force? Yes.
 757. When a case is reported, how do you act? We find the case out, and report it to the Superintendent of Police, who gives us authority to gather the girls in who are suffering from disease.
 758. It has been reported to the Commission that there are many girls suffering from the disease who are not taken to the Hospital; are you aware of any such cases? No.
 759. How do you account for the small number of cases treated at the Hospital during the year? The town is now comparatively clean.
 760. Is that, in your opinion, due to the Contagious Diseases Act? Yes.
 761. *By Dr. Huston.*—In the case of a married woman taking men to her house, and distributing the disease, can you take action? We can only take action where it can be proved that the woman has received money.
 762. *By Mr. Rooke.*—From your experience of the working of the Act, can you suggest any improvement to the Commission? It would be a good thing if the girls were prevented from obtaining doctors' certificates outside. This practice has the effect of tying the hands of the police; for when a doctor's certificate is presented we can take no action. It is frequently the case that a girl is sent for, and she makes her appearance with a doctor's certificate certifying that she is clean, while at the time she may be suffering from the disease. I am informed that the doctors cannot always detect the disease, because the infected girls use chemicals before going up to be examined.
 763. *By Mr. Lewis.*—From whom did you receive your appointment? Mr Pedder, the Superintendent, received his appointment, and I act under his instructions.
 764. Have you heard any complaints from the matron of the girls' behaviour while detained at the institution? I have heard her tell the girls that she hoped they would behave themselves; and I have heard them threaten to act differently. One girl was brought to the Police Court for knocking the place about.
 765. Have you ever been inside the Hospital? I only go to the gate.
 766. *By Dr. Huston.*—Do you receive many certificates? Yes.
 767. *By Mr. Gill.*—Have any of the other detectives the same power as you? Yes, Detective Franklin.

DETECTIVE GEO. FRANKLIN, *City Police Force, Hobart, called in and examined.*

768. *By Mr. Rooke.*—What is your name, and what position do you hold? My name is George Franklin, and I am a Detective-Sergeant in the City Police Force, Hobart.
 769. How long have you been in that position? About three years.
 770. Have you had much experience in the carrying out of the Contagious Diseases Act? I have only had a little experience in the absence of Detective Delaney, who usually does this work.

771. Do you know that there are many girls in the city suffering from disease, and who are not taken to the Hospital? I could not say that there are many.

772. In your opinion has the Act had the effect of cleansing the city from disease? Yes, most decidedly.

773. And you attribute the small number of patients at the Hospital to this fact? Yes. There is a great deal more disease among the servant girls than among the prostitutes. I know that to be a positive fact.

774. What is your opinion in regard to the medical certificates which are procured by the girls from private medical men? I think we should have power to take a girl at once without authority, so that she would have no time to get a certificate, and that if she had a certificate it should not do away with the examination. They should be detained for some time, for two reasons: in the first place they are in the habit of using chemical lotions which have the effect of preventing detection for a time; and secondly, diseased girls have sent friends who are not infected to be examined in their place, and in their names. The doctors do not know the names of the girls, and are not aware of the imposition. If they could be taken at once without authority and detained for some time, the evil would be remedied.

WEDNESDAY, FEBRUARY 29, 1888.

DR. C. E. BARNARD, *Medical Officer, New Town Charitable Institution, called in and examined.*

775. *By Mr. Rooke.*—What is your name? Charles Edward Barnard.

776. You are Medical Officer attending the New Town Charitable Institution? Yes.

777. How long have you been acting in that capacity? About three years.

778. How often do you visit the Institution? Twice a week regularly, and also when required.

779. Is there proper accommodation for the sick? The sick wards are rather overcrowded, and the beds are too close together. I think that they should have more cubic feet.

780. Does that apply all through the Institution? Yes.

781. Are the medical comforts freely distributed? Yes; they are in my charge, and I give the sick all the comforts, such as spirits and other necessities, that they require.

782. Do you think that any improvement is necessary in the baths? Yes, they certainly do require improvement; but they answer the purpose very well.

783. Is there anything to complain of with regard to the food? No; the dietary system is very good. I have paid special attention to that matter, considering it the principal part of the treatment of these old people. I frequently go through the kitchen to look at the food, and also see the inmates at their meals. They seem very well satisfied, and make no complaints.

784. Do you visit the female portion of the paupers? Yes.

785. You are aware that there are a number of children there: do you consider it advisable to send children there? It is certainly not an institution intended for children; but I do not think it is objectionable to send them there, provided they are in charge of women who will treat them properly.

786. Are they treated properly? From what I have seen, yes.

787. Can you suggest any improvements? Yes; there is no doubt that the old people who attend to the sick,—though they manage very well,—are not so capable of performing these duties as they would be if they were younger. The majority of them are old and decrepid, and, as one very important part of the treatment of the aged is good nursing, I would recommend the appointment of two good nurses for the day-time for each hospital ward.

788. Do you not think it would be objectionable for women to attend the old men who are at the Institution? I do not think there is anything objectionable in that; they are lying in bed all the time. The nurses should, however, be of a mature age, and married women. I think the sick there should receive as much comfort as if they were men of more refined habits; and if this suggestion were carried out, the Institution would be as nearly perfect as possible. I am speaking now of the male side; on the female side the paupers are not so helpless, and they attend to each other better.

789. *By Dr. Huston.*—Is the place very much overcrowded? Not at the present time; but during winter some of the inmates have to lie on the floor. The number of paupers varies from time to time.

790. Have you a ward exclusively for cancer? Yes.

791. Are all the cancer patients in that ward? No; the ward is too small. There are five cases of cancer altogether, and only room in the cancer ward for three. But the two cases in the general wards are not so repulsive as those in the small ward.

792. Can you inform the Commission what space the cancer patients have, per cubic feet? I cannot tell the number of cubic feet; but the ward is certainly too small for its purpose.

793. Are you restricted in the use of medical comforts? No; I have never been requested to issue them less freely than I have been in the habit of doing. I issue them to the sick who are lying in bed, and who are so completely broken down as to require them. It depends principally upon the nature of the sickness. Those who are able to walk about do not require more than the ordinary food.

794. Do you think that the inmates of the Institution get enough air? As a rule they object to too much air, and close up the windows and openings. But there should be, I consider, permanent ventilators

which cannot be closed, and which would not be open to the objection of draught. I have not noticed anything of the kind at the Institution. Judging altogether from my experience the sanitary arrangements are not so effective as I should like them to be. The health of the inmates has, however, been remarkably good, and there has not been any epidemic during the time that I have been connected with the Institution, and I have not had one case of typhoid fever, and very little diarrhoea. The latter complaint was very prevalent at one time owing to inferior water; but since the new reservoir was completed, which I am told was built by the men themselves, there has been very little of it.

795. What arrangements are made in cases of sudden and serious illness? The sick are looked after by the assistant superintendent, who dispenses the medicines, attends to their diet, and carries out my instructions generally with regard to them very efficiently. When anything serious occurs, he at once telephones for me or sends a messenger, and I go out, whether by day or night.

796. In view of the fact that there is a large amount of sickness and chronic disease amongst the inmates, do you think that it is sufficient to visit the Institution twice a week? Yes, provided there is an efficient assistant on the spot to look after them. Mr. Seager, the assistant, has had a large amount of experience, and is quite capable of attending to the ordinary cases.

797. Would it be an improvement to have an intelligent semi-professional man as dispenser? I would not recommend such an appointment at the present time. Mr. Seager goes round every morning, and the majority of cases suffer more from old age than sickness, so that a medical man in constant attendance is not so much required as good nursing and medical comforts.

798. Do you ever make a visit at night? Yes, I have been there very late at night.

799. Do you consider that the Institution is sufficiently lighted? It might be improved in the ordinary wards, but a brilliant light would be hurtful for the sick. The place is lighted by kerosene.

800. Would not gas be an improvement? Yes.

801. With regard to the lavatories, the men who wash at the bottom have to use the same water that has been used by the men at the top: do you think that is desirable? No, I do not.

802. Have you made any recommendation that it be altered? No; my attention has never been specially called to the fact; but no inmate who is suffering from a skin disease would wash with the general inmates.

803. *By Mr. Gill.*—Have any of the officers power to issue medical comforts? Mr. Seager issues them under my supervision and with my consent, and a record is kept of every ounce of spirits that is issued. He acts with discretion when a patient is taken suddenly ill; but the spirits are not issued indiscriminately.

804. *By Mr. Lewis.*—Do you see the majority of the inmates? I see every sick patient who is in bed, and also those who express a wish to see me.

805. Do you go round the Institution generally, and see that the sanitary arrangements are carried out? Yes, and if anything comes under my notice I speak to Mr. Seager.

806. How long do your visits usually take? An hour.

807. If properly qualified nurses were introduced, as you suggest, how many would be sufficient? To go economically to work, two would be sufficient during the day for each hospital ward, and one at night.

808. What salary would these nurses require? I should think about £40 a year and quarters.

809. Could any of the attendants be dispensed with, or would they be required? It would be advisable to have them in conjunction with the nurses.

810. Do these pauper attendants carry out your orders? Yes, as well as they can.

811. Do the officials carry out your orders? As far as I can judge, yes.

812. Has there ever been a case of delay in summoning you in a case of serious illness? No.

813. Have you ever reached the Institution a day too late? I have arrived after death; but I have always found that I could not have done anything had I been present.

814. Is there a ward reserved for infectious diseases? No.

815. What, then, would happen if an infectious disease broke out? I would send the patients to the General Hospital. The Institution is not considered a curative one, and any serious cases that cannot be treated there are always sent to the General Hospital.

816. Are patients suffering from skin diseases allowed to mix with the other patients? If the disease is not infectious, yes.

817. Would it not be desirable to have a ward exclusively for these diseases? The patients are not at all dangerous to their neighbours, but still it would be desirable. I have already stated that a larger cancer ward is necessary.

818. There is an idiot at the Institution—do you know why he was taken there? No; I think he was there before I was appointed.

819. Do you consider that disinfectants are sufficiently used? I have always ordered them, and as far as I can judge they have been used freely.

820. *By Dr. Huston.*—Would you know from the quantity consumed that they had been used? Yes; but I trust more to cleanliness than to disinfectants, which, although very useful, cannot keep down fætor unless cleanliness is persisted in.

821. *By Mr. Lewis.*—Do you always inspect the wards and see if there is anything wrong? Yes, I am constantly looking round them.

822. Do you report to the Chief Secretary or to Mr. O'Boyle? If there is anything requiring attention I mention it to Mr. Seager, who attends to the matter.

823. *By Mr. Rooke.*—Is the Institution visited by Official Visitors? No.

824. Do you think it would be desirable to appoint Official Visitors to examine the place? I do not see any necessity for them; but it would be a step in the right direction, in order to satisfy the public mind.

MR. JOHN WITHRINGTON, *Superintendent New Town Charitable Institution, called in and examined.*

825. *By Mr. Rooke.*—What is your name, and what position do you occupy? My name is John Withrington, and I am Superintendent of the New Town Charitable Institution.

826. How long have you been at the Brickfields and New Town Institution? 29 years.

827. Is there sufficient room for the inmates? Yes, with the exception that during winter time a few of the paupers have to lie on the floor for a short time.

828. Are the buildings in good repair? Yes. Tenders are now being called for a few repairs that are necessary.

829. Is there sufficient ground? Yes.

830. Are the sanitary arrangements satisfactory? Yes.

831. With regard to the requirements of the Institution, such as utensils, do you get well supplied? Yes; whenever I want anything I make a requisition, and although sometimes there is a little difficulty, I generally get what I ask for.

832. Is the supply of meat and vegetables of good quality? Yes, otherwise they would be rejected.

833. Can you suggest any improvements in the lavatories? They are deficient, and I have already put them down as necessities, and will be attended to in the next requisition for repairs, &c.

834. Is the kitchen in a satisfactory condition? Yes.

835. Have you plenty of water? Yes.

836. Do you classify the patients? Yes, as much as possible. We keep the respectable men separate from the others, and those who are suffering from ulcers are kept in separate wards. The cancer ward are not large enough, and any very severe cases of this disease are sent to the General Hospital, Hobart.

837. Is there a regular system of admitting invalids to the Institution? Yes; for town cases an interim order is obtained from the Benevolent Society, and then a proper order is supplied by the Administrator of Charitable Grants. Country cases come direct from the Administrator of Charitable Grants.

838. What is the system with regard to their discharge? The period of detention is three months, and then, if they are better, the Administrator, Mr. O'Boyle, allows them to be discharged.

839. If they desire to leave before the expiration of three months, what is the practice? Mr. O'Boyle is consulted, and if he thinks fit he allows them to be discharged.

AFTERNOON SITTING.

Examination of MR. JOHN WITHRINGTON—continued.

840. Many of the paupers go hop-picking, do they not? Yes.

841. Do they have to obtain the doctor's certificate before leaving the Institution if their period of detention has not expired? Yes; they are not allowed to go without the doctor certifies that they are able to do light work, such as hop-picking, &c.

842. When the hop-picking is over do they have to get a fresh order for admission? Yes; and we generally get them back again.

843. Are there any Official Visitors? No, there never have been any.

844. How is the washing done? On the establishment. The men and women do their own washing.

845. Would it be an improvement to have machinery for washing? No, we do not require machinery; the more labour we can give the inmates the better, and they would be idle unless they had the washing to do.

846. Can you make any suggestions in the way of utilising the labour to as great an extent as possible to minimise the cost of the Institution? No.

847. Do you sell any of the produce from the garden? No.

848. Are you supplied with vegetables from the garden all the year round? We are supplied with green vegetables, but not potatoes.

849. Do you think that if you had more ground you could utilise the labour? No, I don't think I could.

850. With regard to the sick, would you recommend that female nurses be employed to look after them? No, decidedly not.

851. What is your reason? They are men of very dirty habits, and not such as would induce women to attend to them.

852. There are some children on the female side of the Institution—do you approve of their being there? No, I never did approve of it. There are 10 in the Institution now, who were admitted through the Administrator of Charitable Grants; but I believe they are a source of annoyance at times.

853. In the event of a fire breaking out, have you appliances for extinguishing it? Yes.

854. Have you sufficient force of water? Yes.

855. In your report of 1886 you mentioned everything was not so satisfactory as you could wish in case of fire: has that been altered? Yes. We have not got the fire-plugs yet. I understand they have been ordered.

856. *By Dr. Huston.*—How many inmates are there at the Institution at the present time? 415 men, 168 women, 10 children. We have accommodation for about 500 men.

857. Would there be plenty of air for that number? Yes, about 600 feet.

858. What amount of air can you give each patient in the cancer ward? Four or five hundred feet—not more.

859. Are there any patients suffering from cancer in any of the other wards? Yes, one or two, who are in the ulcer ward.

860. You have an ulcer ward? Yes; it is devoted to patients suffering from bad legs, ulcers, &c.

861. What is the average number of sick all the year round? About 100. The sickness is principally from old age.

862. On what days does the doctor visit the Institution? Mondays and Thursdays, and also when required.

863. *By Mr. Lewis.*—Have you any young people in the Institution? Yes, a few who are imbecile or are not able to take care of themselves.

864. When did the system of sending children there commence? Children have always been sent there since it became an establishment for female paupers, but not before that time.

865. How many of the paupers are employed at the Government farm? 13.

866. Do they return to the Institution? No; the overseer keeps them at the farm, and has control over them.

867. Are the paupers employed at the Cascades Lunatic Asylum under your control? No; there has been an alteration in the previous practice, and I have no control over them now.

868. What check have you upon the night warders in the hospital? Mr. Seager and myself are constantly about at night, and frequently in the middle of the night we make a visit to the hospital wards, &c.

869. You said that it would be very undesirable that female nurses should be employed in the male division: are you of opinion that trained male nurses should be employed to look after the sick and exercise supervision over them? No; we do it ourselves.

870. Are the regulations satisfactory? Yes.

871. Do the repairs now in progress include improvements to the lavatories? No, there is not money enough at present; but a requisition will be laid before Parliament when they meet.

872. *By Mr. Gill.*—Are you satisfied with the present mode of admitting paupers to the Institution? No. In my opinion they should be sent direct from the Administrator of Charitable Grants, without having to get an order first from the Benevolent Society.

873. Have you any power over them if they refuse to work? Yes; I have the power of bringing them before the Police Magistrate.

874. Have you any reason to suppose that idle and lazy men get into your Institution who are able to work? Sometimes there is a case of that description, but the man is sent away at once.

875. *By Mr. Rooke.*—Can you make any further suggestions in the way of improvement? There should be new closets, and gas would be an improvement; but, I think, everything is perfectly satisfactory.

N.B.—With respect to female nurses that would be required for both divisions, between 20 and 30, and about £1000 a year for wages, besides rations, clothing, &c. Quarters must be provided—in fact built—which means a sum of between £4000 and £5000 for the first year, and about £2000 a year afterwards.—J. WITHERINGTON, *Superintendent*.

MRS. LOUISA HURST, *Matron New Town Charitable Institution, called in and examined.*

876. *By Mr. Rooke.*—You are Matron of the Female Division of the New Town Charitable Institution? Yes.

877. How long have you held that position? Nearly ten years.

878. In your opinion have you sufficient room? Yes; we are not overcrowded, except, perhaps, for a couple of months in the winter time.

879. Do you think the food and bedding are satisfactory? Yes.

880. Can you suggest any improvement in the lavatory? Yes, the lavatory is rather defective, and we require some tip basins.

881. Can you suggest any other improvements in your division? I would suggest that a press be procured for each of the hospitals, on the same principle as the presses used at the General Hospital.

882. How is the washing done? The women and men do their own washing.

883. Is that the principal part of the women's work? They have a deal of hair-picking to do, and also sewing. Hair mattresses are used, and they require picking two or three times a year.

884. Is the wash-house in good order? Yes.

885. Are the women employed in sewing or washing for anyone outside the Institution? No; we cannot take in any work—the women are too old.

886. Are there any young women at the Institution? Yes, but they are afflicted in some way.

887. Are you of opinion that any are sent there who are not fit objects? No. I scarcely think that the old and decrepit could do the whole of the work of the building, and the strongest are put to do the heavier portion of the work,—such as carrying water up and down stairs.

888. You have ten children at the establishment: how were they admitted? On an order from the Benevolent Society.

889. Do you find that the number is growing? No; I have no room for a greater number.

890. Do you find that they are an annoyance to the inmates? No; many of them are extremely fond of children, and almost rear them.

891. Would you recommend that the number be increased? No; I cannot take more than 10.

892. Is your hospital accommodation satisfactory? Yes.

893. Do you find any difficulty in getting medical comforts for the sick? No.

894. Some of the women go hop-picking—in your opinion are they fit for that kind of work? It is better to let them go in a regular way than to allow them to evade the regulations. The doctor has, of course, to pass them.

894A. Do they always return to the Institution? Yes.

895. *By Dr. Huston.*—Do you have a great many sick? About 36.

896. Are they under active medical treatment? Yes, the doctor sees them twice a week; but their ailment is mostly senility.

897. Do they get plenty of medical comforts? Yes, everything they require in that way. There are usually about 50 on the extra sheet.

898. How many have you in the cancer ward? I have not a cancer case in my division now. I use the ward for ulcer cases.

899. Have you plenty of air space? Yes, and the ventilation is good.

900. Are the lavatory arrangements good? Yes; but there could be a little improvement in that direction.

901. Have you ample bathing accommodation? There are two large baths and a bathroom attached to each large ward.

902. Are there any cases of skin disease in your division? There is one patient suffering from scrofula, who came from the Industrial School. Dr. Crouch thought our food and comforts would cure her.

903. Have you any idiots? I have several half-witted females, and one complete idiot.

904. How long have you had her? She came from Launceston about six weeks ago.

905. Do the women work cheerfully? Yes. I rarely have to raise my voice.

906. *By Mr. Lewis.*—Do you think it would be desirable to have a trained hospital nurse in each of the hospital wards? No, I would rather be without them. It would be introducing an uncontrollable element into the establishment, and they would jar with existing arrangements.

907. Do you consider that the attendants in the hospital wards do their duty? Yes; I have a trustworthy person who reports everything to me. She is usually in the intermediate ward between the hospitals, and the attendants can communicate with her at any hour by day or night, and altogether the system works very satisfactorily. I always select the best women for hospital nurses.

908. Has Dr. Barnard ever complained to you of any neglect on the part of the attendants? No.

909. Has he ever suggested to you that it would be desirable to have trained nurses? I think he has for the lower division, but not for my side. He is always thoroughly satisfied.

910. *By Mr. Gill.*—What means have the patients upstairs for exercise? They are all in bed, with the exception of two or three women who have seen better days, and these are able to go down to the yard for exercise.

911. Do you think there is any necessity for a balcony? No.

912. *By Mr. Rooke.*—How is the division lighted? By kerosene.

913. Do you think it would be an improvement to have gas? Yes, decidedly. There is a certain amount of risk attached to kerosene, and I would certainly recommend that gas be laid on.

MR. SIMON MURPHY, *Head Warder New Town Charitable Institution, called in and examined.*

914. *By Mr. Rooke.*—Your name is Samuel Murphy, and you are Head Warder at the New Town Charitable Institution? Yes.

915. What are your duties? Constant supervision of the inmates.

916. How long have you been at the Institution. Nearly eight years.

917. From your experience would you recommend the introduction of trained female nurses to look after the old men who are sick? No. I think the attendants do their duty very well, and are very kind to the patients.

918. Do you think it would be repulsive work for women? The men's habits are very dirty, and I think it would.

919. How often are the inmates washed? Every morning.

920. How often do they have a bath? At least once a fortnight. They bathe in lots of 12, and it takes a fortnight to go through the whole number.

921. If you had more bath accommodation you could make them have a bath more frequently? Yes.

922. Are all those who are able to work utilised? Yes; I take the names as they come in, and those who are fit to work are taken to the Superintendent. If any man refuses to work, the doctor is called to examine him.

923. Have you enough work for them? Yes.

924. If you had more ground, would you be able to utilise more labour? Yes, I think so.

925. How many men are employed in washing for the whole Institution? Four.

926. Is there any difficulty about the cooking? No. I visit the kitchen frequently during the day.

927. How often do the men require a new suit of clothes? When they require clothes, I send in a requisition to the storekeeper, who issues them to me new.

928. How often is their linen changed? Once a week.

929. Do you consider that the lavatory requires improving? Yes.

930. Have you any trouble in preserving discipline? Yes, occasionally I have trouble.

931. Have you a sufficient number of attendants to keep up the discipline? Yes.

932. Do you approve of the system of having pauper attendants? Yes; it saves money.

933. Do you consider that it would be an improvement to have gas laid on to take the place of the kerosene lamps now in use? Yes, it would be a great improvement.

934. Do the sick get sufficient medical attendance? Yes. The doctor visits them twice a week, and if he is required at other times he is sent for.

935. *By Dr. Huston.*—What medical comforts do the patients get? Gruel, sago, arrowroot, brandy, rum, and some of them wine; they get white bread in the hospitals, and the ordinary inmates get brown.

936. How many have you in hospital? Over 150.

937. Is the cancer ward not too small? Yes, but we see that it is disinfected every morning.

938. Do you raise all the vegetables that you require? Yes, with the exception of potatoes.

939. If you had more ground, would you be able to raise sufficient potatoes? No, I do not think so, the men are too weak to plant them.

940. *By Mr. Gill.*—If an inducement were held out to them in the shape of an extra allowance of tobacco, would they be able to do more work? No, they get plenty of tobacco now; men working get extra.

941. How many working men can you muster? From 80 to 100.

942. Would they be able to cultivate a larger area of land? No, they are all too old.

943. As a rule do they keep themselves clean? Yes, but they require looking after.

944. Have you any sleeping on the floor at the present time? No. When we mustered yesterday there were 104 beds vacant, but a few have to lie on the floor in winter.

945. *By Mr. Brown.*—What is the area of the ground? I do not know.

946. If you had more ground, and it was broken up with the plough, would the men be able to work it? Yes, I think so.

947. *By Dr. Huston.*—What becomes of the nightsoil? It is used as manure, after being kept covered with earth for some time.

948. How far is it kept from the building? About 100 yards. It is covered very carefully, and disinfectants are plentifully used.

949. *By Mr. Lewis.*—Do you have to look after these disinfectants? Yes; I keep them in my store.

950. Do you receive orders where to sprinkle it? No; I see to it myself.

951. Do you think sufficient is used in the closets and about the place generally? Yes; the closets are thoroughly washed out every morning, and if there is any offensive smell disinfectants are used, but not otherwise.

952. What is done with the clothing that is reported dirty? It is washed at once, and then sent to the tailor for repairs, and returned to me.

953. Do you serve it out to the same men? No; it might be worn by other inmates.

954. Have you a barber attached to the Institution? Yes; we have two paupers who do the work.

955. How often are the men shaved? Usually twice a week.

956. *By Dr. Huston.*—How many men bathe in one bath before the water is changed? Only one; the bath is then emptied and refilled.

957. *By Mr. Gill.*—What becomes of the clothes of the men who die in the Institution? Some are sold, some are given to the Benevolent Society, some to the paupers leaving the Institution whose clothes are inferior, and some are destroyed.

958. Do you think it would be an improvement if the men wore a special suit issued by the Institution? It would be better for the men, but the expense would be greater.

THURSDAY, MARCH 1, 1888.

MR. FREDERICK R. SEAGER, *Assistant Superintendent and Storekeeper New Town Charitable Institution, called in and examined.*

959. *By Mr. Rooke.*—How long have you occupied the position of Assistant Superintendent and Storekeeper? Nine years.

960. Do you serve out everything? Yes.

961. Have you anything to complain of with regard to the character and quality of the food? No.

962. Do you have charge of the medical comforts also? Yes; and I issue them under the direction of the Medical Officer only, except in cases of emergency, when I use my own discretion and report to him.

963. Do you think the labour is utilised to its fullest extent? I do.

964. If you had more ground could you raise more vegetables? I very much question it. The inmates are very frail, and become more incapacitated for work every year.

965. Is the Institution plentifully supplied with water? Yes.

966. Is the bathing accommodation sufficient? It is rather insufficient in the hospital division.

967. Do you think it would be advisable to increase the bathing accommodation in the other part of the Institution, so that the men could bathe more frequently? It would be an improvement.

968. Do the sick get proper attention? I would advise that more competent attendants be employed for the hospitals.

969. Would it, in your opinion, be judicious to employ female nurses to attend to the men, knowing, as you do, their habits? Yes; I have spoken to two or three nurses at the General Hospital on the subject, and they inform me that there would be no difficulty in procuring nurses to wait upon them.

970. Is the Institution sufficiently lighted? It could be improved. I would recommend gas instead of kerosene, both for safety and comfort.

971. You have no Official Visitors? No.

972. Do you think it would be an improvement to have Official Visitors? I do not think so.

973. With regard to the men who are allowed to leave the Institution to go hop-picking, do they first get a medical certificate? Yes. I might explain that the men who have finished their period of detention may claim their discharge without reference to the medical officer; but those who have not are brought before the medical officer, who examines them, and, if they are fit to leave, he grants a certificate, which is forwarded to the Administrator of Charitable Grants for his judgment.

974. Have you a sufficient number of attendants? For those who are sick, as I have stated, the attendance requires improving; but for those who are able to get about, the attendance is quite sufficient.

975. In addition to the improvements which you have suggested, is there anything else that requires immediate attention? The cooking for the sick, although done fairly well by the inmates employed for that purpose, is not as it should be, and a good healthy man should, in my opinion, be employed. I would also suggest that there be a small bath and lavatory in each of the hospital wards.

976. *By Dr. Huston.*—You have stated that official visitors are not required: will you give us your reasons for forming that opinion? The place is open night and day to the public, and is constantly filled with visitors, so that there is really nothing for the Official Visitors to do. There is nothing going wrong.

977. But in a large establishment of that kind would it not be an improvement to have some sort of outside supervision as a guarantee that the Institution was being properly conducted and the various duties efficiently performed? I certainly do not see the necessity for Official Visitors.

978. Where would any case of acute and dangerous sickness be treated? All cases of that nature are sent to the General Hospital.

979. How many working men have you? About 100.

980. How many are able to work out of doors? Very few, if any.

981. What becomes of the nightsoil? It is buried in trenches every morning, and utilised for manure.

982. How far is it taken from the building? About 100 yards.

983. Do you find it offensive? No, only while it is being removed.

984. Do you get a good supply of fuel? Yes.

985. Is there a scale of rations? Yes.

986. In a case of sudden illness or accident you are the person called upon to attend to it in the absence of the doctor: have you ever had a fatal case under these circumstances? No.

987. Have you had any cases of sudden death? Very rarely. We have not had a case for a number of years.

988. How many inmates are placed in one ward? Fifty in the ordinary wards; 32 in the hospital wards.

989. What provision have you for closets, &c.? We have ordinary night-stools in the hospitals, night-tubs, closets, and earth-closets.

990. Do you find that sufficient to keep down offensive smells? Yes, they are all frequently emptied.

991. *By Mr. Dobbie.*—In the absence of any kind of official visitation, to whom do you report your requirements? To the Chief Secretary.

992. Has the want of bath accommodation been reported? Yes, and it was improved slightly, but not to the extent which, I think, is necessary on the hospital side.

993. When you make any recommendations do you find any difficulty in getting them attended to? No; the Clerk of Works is usually sent out, and it is done at once.

994. You have recommended that female nurses should be employed. Can you give an estimate of the probable cost of this change? In my opinion a full working staff of about 20 nurses would be necessary, and they would require more than the nurses receive at the General Hospital. The probable cost per year altogether would be about £1000.

995. In view of that increased expenditure do you recommend the change? Most decidedly I do.

996. Are the men not properly attended to? To the best of the attendants' ability they are.

997. Are they subject to any serious discomforts? No, except the incapacity of the warders.

998. Do any of these men suffer any real injury from the present nursing arrangements. No, I do not think so.

999. Is there any rule as to the age or condition of persons who are admitted to the Institution? None whatever.

1000. What is the process? In the first place they apply for an order to the Benevolent Society; they are then forwarded with that order to the hospital for a medical certificate, and they get another memorandum to the Superintendent for admission. The detention order is made by the Administrator.

1001. Practically it is the Benevolent Society who send the people out there? Yes, from Hobart; the orders for country people come direct from the Administrator of Charitable Grants.

1002. What proportion are sent from Hobart? Two-thirds.

1003. Is there no limit as to age? No.

1004. Are any young men sent there? Yes, but they are afflicted with slight brain derangements or epilepsy.

1005. Should not these cases be sent to the New Norfolk Asylum? I only get cases that are perfectly harmless, and if they become unmanageable they are forwarded to the General Hospital.

1006. *By Dr. Huston.*—Are any of these cases capable of cure? I do not think so.

1007. What other special cases of young men are at the Institution? We have one afflicted with blindness, and an idiot who has been with us for a long time.

1008. Is there not a young man named M'Guinness there? Yes, he is suffering from consumption.

1009. Is he quite unable to earn a living? Yes; he is not fit to do any kind of work.

1010. Is he ever likely to leave the Institution? No.

1011. From your experience, can you tell the Commission if it is a fact that no person is sent there who is able to earn a living? Yes, that is the case.

1012. Do you think the Benevolent Society ever sent any people there in order to relieve their funds? No. I do not know of any who have been admitted who are not fit objects to be there.

1013. Then the Institution is never abused? No.

1014. Do you think that the Benevolent Society is the proper authority to send people to the Institution? No.

1015. Whom would you recommend as the proper authority? The Administrator of Charitable Grants.

1016. Why? I do not agree with the dual authority. All country cases come through the Administrator direct. In the case of a man who desires to be discharged, we address the Administrator, who asks the opinion of the Benevolent Society, and hence a deal of delay is occasioned. We always address the Administrator, who appears to be the proper person, and do not recognise the Society at all.

1017. When a person is sent in by the Benevolent Society he is detained for a certain period, is he not? Yes, for three months. The Administrator makes the order for detention.

1018. *By Mr. Brown.*—Do you know the area of cultivable land on the farm? Roughly speaking, five acres.

1019. Does it supply the Institution with vegetables? With green vegetables, but not potatoes.

1020. Are there any rules and regulations? Yes.

1021. By whom have they been prepared? By the Superintendent and myself, subject to the approval of the Chief Secretary.

1022. What is the daily routine? The inmates are supposed to be at breakfast at 8 o'clock; at 9 o'clock a bell rings and work is commenced, those who are able to do outside work being taken out by the overseer; at 10 the building is open for inspection; at 12, cease labour; at 1, dinner; at 2 labour is resumed until half-past 4; at 5, tea; at 7 o'clock the muster bell is rung, and the head warder goes round the Institution. The silence bell is rung at 9 o'clock.

1023. What is provided for each meal? For ordinary inmates—Breakfast, a pint of tea, $\frac{1}{2}$ lb. bread; dinner, pint of soup, $\frac{3}{4}$ lb. meat, $\frac{3}{4}$ lb. potatoes, $\frac{1}{2}$ lb. bread; tea, a pint of tea, and $\frac{1}{2}$ lb. bread. In the hospital extras are allowed with medical comforts, which are ordered by the medical officer.

1024. Are the watchmen occupied night and day? No; there is one at night; the attendants prevent anything happening during the day.

1025. What check have you upon the night watchman? Virtually none, except his own report in the morning.

1026. Do you ever make "surprise" visits? Yes.

1027. Do you classify the inmates? Yes, to the best of our ability; without additional buildings we cannot do more.

1028. Have you anything to suggest with regard to the cancer ward? We require a larger and brighter ward for cancer patients.

1029. In your opinion should the cancer patients (two), who are in the general wards, be kept separate from the ordinary inmates? Yes, I think they should be in the cancer ward; but it is not large enough at the present time.

1030. *By Mr. Gill.*—You have stated that the admission of persons to the Institution was never abused—will you tell the Commission how Tolmache was admitted? Yes. A short time ago he was discharged from the Institution; but he drank very heavily, and after walking about till his feet were severely blistered, he was re-admitted. It was a charity to admit him.

1031. Do you think he is a fit object to be there? I do.

1032. What religious services were held? The Rev. Canon Mason is in charge of the Church of England body, assisted by the Rev. Alfred Martin; the Rev. Father Hennebry attends to the Roman Catholic portion; and other denominations are well represented. The ladies belonging to the Flower Mission devote the whole of Friday afternoon to going round the hospital wards; and the Salvation Army intend to visit the Institution.

1033. Coming back to the stores, do the officers receive a personal allowance of rations? Yes, all except the Superintendent and Matron. They also purchase bread and meat at contract prices, and pay me at the end of every month.

1034. Do they use Government property, such as rugs and bedding? No; these are allowed to the attendants.

1035. Can you make any further suggestions for the better working of the establishment? It would be an improvement to take over the church and convert it into a hospital.

1036. Is the church used for the inmates? Yes; we have the galleries on Sundays.

1037. Is it used in the parish at all? Yes.

1038. Have you officers enough? No; I require more, and they should be a little better paid.

1039. *By Mr. Lewis.*—Would you be satisfied to have male nurses? From what I have seen of them I do not think they would be much improvement.

1040. Have you any means of ascertaining where the inmates come from? Yes; they ramble about Hobart and the suburbs, and get their orders in Hobart.

1041. Do you find any difficulty in maintaining discipline? Very little.

1042. How do you account for the very dirty appearance of the clothes worn by the inmates? Their habits are naturally dirty.

1043. What means have you in case of fire? Only temporary at present, but I have been informed that stand-pipes have been ordered.

1044. Have you a sufficient force of water? Yes; I think we could throw it over the roof. We have a reservoir at the back of the building, quite distinct from the town supply.

1045. How many gallons does it hold? I do not know.

1046. *By Dr. Huston.*—Do you do any work for the outside public, or for other institutions? We have not the labour to do much, but the inmates break stones, which are sold.

1047. Some of your people are at the Cascades, are they not? The paupers at the Cascades are not attached to the New Town Institution. There are also 20 men at the Cemetery, and 13 at the Government Farm, but they are attached to our Institution.

1048. What amount do you receive per year from the stone-breaking or other work? On an average about £20 or £30 a-year.

1049. Have you an ample supply of medical comforts? Yes.

1050. Are they administered freely? Yes.

1051. Is the man Tolmaque able to do any work? No; he is an invalid, and totally incapable of doing anything.

1052. Is his mental condition sound? No.

THE NEW NORFOLK ASYLUM FOR THE INSANE, AND CASCADES
ASYLUM—*continued.*

MR. F. W. MITCHELL, *Official Visitor New Norfolk and Cascades Hospitals for the Insane, called in and examined.*

1053. *By Mr. Rooke.*—What is your name? Francis William Mitchell.

1054. You are Official Visitor to the New Norfolk Asylum for the Insane, and also to the Cascades Asylum? I am.

1055. When were you appointed? I was appointed a Commissioner of the Hospital for the Insane, Cascades, in August, 1879, in place of the Honorable Charles Meredith, who resigned; I was appointed a Commissioner of the Hospital for the Insane, New Norfolk, in March, 1882, in place of Walter Angus Bethune Jamieson, Esquire, deceased; I was appointed a Member of a Royal Commission to enquire into and report upon the then present condition of the Asylums for the Insane, the character of buildings, and surrounding grounds, classification of patients, the treatment adopted, and as to the methods pursued for ensuring the safe custody and successful treatment of the Insane in Great Britain, Europe, and the neighbouring colonies in January, 1883; I gave evidence before a Select Committee of the Legislative Council on 24th October, 1883, as to the internal and general management of the Insane at New Norfolk; and I was appointed Official Visitor to the New Norfolk and Cascades Asylums under 49 Vict. No. 35, in December, 1885.

1056. With regard to the New Norfolk Asylum, do you consider that there is sufficient ground for the purpose? No, I do not. I consider that it is highly desirable and necessary that the same proportion of land to each patient should exist in connection with the New Norfolk Asylum as generally appertains to similar institutions in other places.

1057. You recommend, then, that more land be purchased? Yes, an additional 62 acres; the present acreage is 48. This should be done with a view of giving out-door employment to the patients. The best authorities on psychology tell us that that is the best occupation for them.

1058. How often do you visit the Institution? Never less than once a month, frequently oftener; occasionally it happens that the relations or friends of patients are desirous of removing them. On such occasions I am always ready to attend, and take the necessary steps for their discharge.

1059. Do you call at stated times? Our intended visits may become known, but not from ourselves. We sometimes agree to pay visits without notice, and one of us has been there at midnight, and found everything in order. Visits have been paid without the slightest possibility of the officers knowing that we were coming, and we have gone round the Institution unattended by any of the officers.

1060. On these visits was everything satisfactory? Yes, invariably so. All complaints have been thoroughly investigated.

1061. Do you consider that there are sufficient warders? Yes; the average is above other institutions.

1062. Do you approve of so many casual visitors? Most certainly not. I consider that the practice is calculated in a vast degree to disturb the patients, and to throw them back in their chances of recovery. It has been noticed that for a day or two after the Asylum has been attended by a large number of visitors the patients are excited.

1063. Does the same remark apply to the Cascades Asylum? Yes, but with greater force. In the existing rules of the Cascades Asylum—rules which, I believe, were made before the Institution was placed under a medical superintendent—the head attendant has power to grant an order. We have been accustomed to see, on our official visits, casual visitors in such numbers as we have regarded as extremely improper.

1064. Would you approve of the number who have power to issue orders being curtailed, and that the Chief Secretary and Official Visitors only have this power? Yes, I entirely approve of that suggestion.

1065. With regard to the wood-cutting at New Norfolk, do you consider that a steam-engine should be obtained for that purpose? Most decidedly. We have recently had an engine offered to us, and upon examination it was found to be satisfactory in all respects; but the Government suggested that it would be better to wait for the steam laundry. I am, however, very strongly of opinion that it would be most desirable to get a small steam-engine for cutting wood with as little delay as possible, pending the steam laundry being obtained.

1066. The erection of a place of worship has been suggested: what is your opinion with regard to that? There is no doubt that the proper inside surroundings of a place of worship would suggest and induce attendance; but it is a very difficult problem to solve, whether the effect of the service would be of much benefit. Religious services are held at the Asylums at the present time, but the patients, I think, attend only as a matter of course, and relapse into the same line of conversation and habits as before.

1067. Do you approve of the suggestion that a small sum of money, say £50 or £100, be placed annually under the control of the Medical Superintendent for providing the patients with something in the way of amusements? Yes, I think such a sum should be appropriated? At present the patients have a ball once a fortnight, and when the township is visited by a company of actors or acrobats, &c. we always make an application to them to perform for the amusement of the patients. They are induced to do this for a low rate, generally about three guineas, because we give them the privilege of charging the other portion of the audience for admission.

1068. Do you approve of the management generally? Yes; but I do not approve of the Medical Superintendent and Assistant Medical Officer doing so much clerical work. You are paying the medical officers salaries which professional men necessarily require and expect, whilst a large portion of the Medical Superintendent's time is taken up making out accounts with the Government and friends of

patients, and correspondence generally, of which there is a great deal. This work could be done more effectually by a secretary or good clerk, and the Superintendents would then have more time to devote to professional studies and duties. With this addition the management will be as satisfactory as possible.

1069. *By Mr. Dobbie.*—Is there not a clerk at the Asylum? Yes, and an assistant; but he is also store-keeper, and scarcely of the calibre, and has not the time to conduct the correspondence as it should be conducted. The correspondence and accounts take up much time. In most other places, as you are no doubt aware, there is a Master in Lunacy, who manages this business entirely separate from the Institution with which he is connected. He generally holds some other office as well. Such an appointment would necessitate an amendment in the existing law. The work could be done in Hobart, judging from what I have seen in New South Wales.

1070. If this official were appointed in Hobart, would he relieve the Superintendent of all the work? Very nearly all. In 1886 the collections from paying patients amounted to about £2500. This amount was made up of numerous sums, necessarily taking up a great deal of time in receiving, paying into the Treasury, and issuing monthly vouchers. Besides, there are constantly applications from friends of patients for particulars as to their state of health, &c., which require replies.

1071. Do you think that the Asylum is sufficiently retired? It is most desirable that Burnett-street, between George and Gray streets, and Gray-street, as far as Humphrey-street, should be closed. There is really no object in keeping them open, because there is a right-of-way to the Lachlan Village at the back of the Asylum. If the front were closed it would give a privacy to the Institution which it does not enjoy at the present time. It frequently happens that excursionists get on to the dwarf wall in front of the Asylum and make objectionable remarks to the patients.

1072. Do you approve of the buildings that are now being erected? I approve of the general scheme; but the idiots' cottage is, in my opinion, unnecessarily costly and elaborate.

1073. What is your opinion with regard to the building which it is proposed to have erected in front of the gentlemen's cottage? It would be a great eyesore, and would debar the occupants of the gentlemen's cottage from an excellent view.

1074. *By Mr. Gill.*—Do you ever allow compensation to other than professional companies for providing entertainments for the patients? Yes, when application is made.

1075. *By Mr. Lewis.*—What fees are paid for the occupants of the gentlemen's cottage? The maximum fee is 5s. per day for both lady and gentlemen patients; but the scale is varied, according to the circumstances in which the relations are placed. If the Official Visitors find, after investigation, that they are unable to pay the maximum fee, the Chief Secretary is informed of the fact, and he sanctions a reduction.

1076. What is the minimum charge? One shilling per day.

1077. Would a patient paying that sum be treated in identically the same way as those who pay the higher charges? Yes, decidedly; it would be a great hardship and cruelty to do otherwise.

1078. *By Dr. Huston.*—Does the aggregate amount received from this class cover the expenses incurred? That is a calculation which I have not made; but I should think the cottages pay.

1079. *By Mr. Rooke.*—Is the Cascades Lunatic Asylum properly managed? I am afraid it is not as well managed as it might be.

1080. Has it ever come under your notice that the warders or attendants are employed for work other than that connected with the Institution? I have no actual knowledge of it.

1081. Are you aware that the Medical Superintendent keeps cows and pigs at the Asylum, and sells milk to the warders? I am not aware that such is the case.

1082. Would you approve of it? No, certainly not; it is highly undesirable that there should be any trafficking between the head of such an institution and those under him.

1083. Are you of opinion that the cook should have as perquisites the fat, &c. from the kitchen? No.

1084. On the whole, do you think that the inmates of the Cascades get properly looked after? Yes; the food is as good as can reasonably be expected under the circumstances.

1085. Do you think that the sick patients are properly cared for, and get sufficient medical comforts? Judging from one case that came under our notice, I think there might be some improvement in this respect; but that is more a medical question.

1086. What case do you refer to? One of the patients was in bed at the time of our visit, and complained of pain in the abdomen. Dr. Smart, our then Chairman, who was present, drew down the bed-clothes and found that there was considerable swelling. He suggested the use of the catheter immediately, and passed the instrument himself, the patient obtaining immediate relief. Possibly if that had been done earlier the man would not have suffered so much pain.

1087. What is your opinion with regard to a patient named De Bomford, who is at the Cascades Asylum? I consider that De Bomford, a Queen's pleasure patient, receives indulgences which interfere very considerably with the discipline of the establishment.

1088. Would that tend to make the others dissatisfied? I think it would do so. We drew the Superintendent's attention to the circumstance during one of our late visits, and asked him whether he considered them necessary for the man's cure? He replied, Perhaps he did. I may mention that we have brought this matter under the notice of the Government by an official letter. The Chief Secretary replied to Dr. Coverdale that he had full confidence that he would do what was right in that matter, or something to that effect.

1089. You are aware that the two heads of the Institution do practically the same work? Yes.

1090. Do you think a saving might be effected here? Yes, I think one chief officer would be quite sufficient.

1091. From your experience do you consider that it is absolutely necessary that a medical officer should reside at the Asylum? That is almost a medical question; but, as far as the mental condition of the inmates is concerned, I do not think a resident medical officer necessary, because there is little or no hope of their recovery; but as far as health is concerned and general treatment, I am of opinion that it is necessary that such an officer should reside there.

1092. *By Mr. Lewis.*—When do you hope to have the rules of the Cascades Asylum revised? The rules are either in the hands of the Chairman, or he has sent them on to the Chief Secretary to be placed before the Executive Council for approval.

1093. Were they prepared by the Official Visitors? They are the old rules altered where necessity required alteration.

1094. Have strict rules been drawn up as to the admission of casual visitors? The new rule is to the effect that no persons shall be admitted unless they are accompanied during their visit by one of the officers of the Institution, and it is suggested that the power given by the old rule to the head-keeper shall be abrogated.

1095. Who is to have the power to issue orders for admission? The Chief Secretary, the Medical Superintendent, and the Official Visitors, I believe.

1096. Is the discipline satisfactory? I cannot say it is satisfactory while such a case as I have mentioned is allowed to pass.

1097. Do you think that the discipline of the warders is satisfactory? Yes, as far as my observation goes.

1098. *By Mr. Dobbie.*—From your knowledge of the question, do you think there are sufficient attendants for the patients? Yes; the average is rather above that of other places.

1099. Your assumption is that the men are always at their posts? Yes.

1100. Do you approve of their being taken away? I certainly do not. They should be entirely employed in attendance on the patients.

1101. One witness has suggested that the whole system should be remodelled, and the two head attendants dispensed with; and that there should be a senior warder in charge of each yard, and one superintendent over the whole: would you approve of such a course being adopted? I think some of the highly-paid officers could be dispensed with; there are too many.

1102. Do you think that the Medical Superintendent, in addition to the work he now performs, could also do the supervision, with a head attendant under him? Yes, I think he could, without the slightest trouble; and he would be brought more in contact with the patients, which would be very desirable.

1103. Have you anything further to suggest? Yes. Under the old Act (22 Vict. No. 23) Section 5 provides for the appointment of a President by the Governor in Council; but in 49 Vict. No. 35, that Clause is repealed, the result being that there is really no legal power given to appoint a Chairman of the Official Visitors. I would suggest that, in the absence of that power, the Board themselves should nominate their Chairman. I might also mention that, although the Chairman is a paid officer of the Government, the remaining Official Visitors are not, although their duties are much the same. That the unaccomplished recommendations contained in the Report of the Royal Commission on the state of the Lunatic Asylums in Tasmania, dated the 16th June, 1883, and the Annual Report on the Hospital for the Insane at New Norfolk for the year 1886, be carried out, and that the sum of £20,000 be placed upon the next Estimates for the purpose of completing the buildings now in course of erection for the refractory females, for providing buildings for the administrative clerk and assistant medical officer within the Institution, the purchase of an additional 62 acres of land, and for increasing the pressure of the water supply in case of fire.

AFTERNOON SITTING.

THE BOYS' TRAINING SCHOOL, CASCADES.

MR. JAS. LONGMORE, *Superintendent Boys' Training School, Cascades, called in and examined.*

1104. *By Dr. Huston.*—You are Superintendent of the Boys' Training School? Yes.

1105. How long have you been in that position? Since the school was opened, in July, 1884.

1106. How many boys have you in the school? We have 37 at present.

1107. Do your numbers vary much? Not during the last 18 months. The average was 35 last year.

1108. Is it an entirely Government establishment? Yes.

1109. Under whose direction are you? Under the direction of the Chief Secretary and a Visiting Board of Management.

1110. What are the functions of the Board? They hold monthly meetings, and generally carry on the Institution under the Chief Secretary.

1111. Do they visit the school regularly every month? Yes, far more frequently.

1112. Are there any fixed days for these visits? I believe that there are two members appointed at each meeting, who are supposed to visit the school at any time.

1113. Do they do so? Yes; the secretary is there frequently twice a week, sometimes oftener.

1113A. What is the usual routine of the day? The boys rise at a little after 6 o'clock, and do general work, such as cleaning and tidying up, till 8 o'clock; from 8 till half-past 9, breakfast, worship, and recreation; school at half-past 9 till half-past 10; industrial work till 1; dinner and recreation from 1 till 2:30; industrial work is then resumed till 5; from that time till half-past 6 washing and recreation; half-past 6 till half-past 7, school; after that worship, and bed.

1114. In what subjects are the boys instructed beyond the ordinary school routine? Farming, carpentering, and gardening.

1115. Are there certain boys set apart for certain duties? Yes; but we do not as a rule keep them all their time at the same kind of work; we give the carpenters a little knowledge of farming.

1116. Have you a practical carpenter to teach them? Yes, and also a farmer and gardener. We generally try to find out what a boy is adapted for. The little boys are usually put to garden work, and the more intelligent into the carpenters' shop.

1117. What is the acreage of the farm? About 12 acres of level land.

1118. Do you find the boys are apt at learning? Yes.

1119. Is there any other trade taught? No.

1120. Do you not think it would be an improvement to give them more technical instruction to have a greater number of trades represented, so that the boys could enter into it *con amore*? We have not sufficient labour. If the land is kept in cultivation a certain amount of labour must be expended upon it.

1121. But if you could get one or two afternoons during the week to give the lads instruction in other trades, would it not be better? Yes, I think that would be an improvement.

1122. Have you any tailors? No; everything in that line is done at the Gaol, and it is very awkward having to send everything there to be done.

1123. Is the washing done by the boys? Yes.

1124. Have you a washing-machine? No; it is all done by hand.

1125. Do you find that the boys who take up the carpentering trade improve at it? Yes.

1126. Have you plenty of tools? Yes.

1127. Do you get all the repairs that are required done by the boys? Yes; and they do all the house painting.

1128. Is the establishment healthy? Yes, exceedingly so.

1129. As a rule are the boys amenable to discipline? Yes.

1130. How long do you keep them? It depends very much on the boys themselves; they are sentenced to from three to five years.

1131. Do you license them out? Yes.

1132. Are they ever sent away before three years have expired? Yes, sometimes before they have been at the school for one year.

1133. Under what circumstances? We find a suitable place for a boy, and his conduct having been taken into consideration, if he has made fair progress in his school studies, he is licensed out for three months at a time.

1134. What has been the result of your experience in the system of licensing the boys out? Good.

1135. Have you ever had to recall them? When we find that the work is not suitable for the boys we take them back, but we have never had to recall them under other circumstances.

1136. Have you had any complaints as to their moral conduct? No.

1137. What control do you exercise over the licensed boys? We exercise control through the master and also through the police, when necessary.

1138. Have you any means of ascertaining whether the boys are being well treated and instructed in their work? Yes; we write to the masters and also to the boys themselves. Careful inquiry is always made before the boys are sent out.

1139. How many are licensed out at the present time? About two dozen.

1140. *By Mr. Lewis.*—Are they all licensed out to farmers? The bulk of them are.

1141. To whom are they licensed? To farmers throughout the colony.

1142. Do you think it would be desirable to license them out to tradesmen in town? No, I am not in favour of that; I prefer sending them to the country.

1143. At the end of every three months are licences renewed if everything is satisfactory? Yes, they are renewed until the end of the period of the sentences. We then have no control over them.

1144. Do you expect them to return when their sentences are completed? No, they are practically discharged when they leave the school.

1145. Do you send any to the Government farm? No.

1146. Do you think that would be a good step to take? We have not sufficient boys to send.

1147. How many cows have you? Five.

1148. Is that a sufficient number? Yes, at present; but we could get more if the demand for milk required it.

1149. Do you sell any milk? We sell a little to the attendants in other establishments who may want it.

1150. Have you sufficient work for the carpenters? We have had hitherto, but I am inclined to think that it will ultimately become less.

1151. What religious instruction do the lads receive? The English and Roman Catholic clergymen visit the school once a week, and the bible is read every evening.

1152. Is attendance compulsory when the clergymen are at the school? We have never had any difficulty with the boys in that respect.

1153. Have the bulk of the boys, when they enter the school, had any previous instruction? No; we have practically to begin from the beginning.

1154. In the accounts attached to the annual report I find a sum for milk, butter, fruit, and vegetables: is that the estimated value of what is raised, or is it realised by the actual sales over and above what you use yourselves? It is realised by the actual sales to the various Institutions, and includes what we use ourselves.

1155. *By Mr. Dobbie.*—You have stated that the educational acquirements of the boys when they enter the school are very poor: as a rule do they make much progress before they leave you? Not very much. We instruct them chiefly in elementary and industrial work; but we as a rule look out for places where they will be assisted in their education, if the boys are under school age when they leave.

1156. Is there any inducement held out to them to behave well while they are with you? We have a mark system and money awards, and they are allowed out as a reward for good behaviour.

1157. Do you find that the lads abuse the privilege of going out? No, not one boy has ever abused it.

1158. Do you supply milk to the warders of the Cascade Asylum? We have supplied a little, but they have ceased to require it.

1159. Could you supply them if they required it? Yes, but as a rule we have not too much to spare, only if required we could keep more cows.

1160. Do you keep pigs? Yes,

1161. Could you keep more? I have thought that we could if we had enough food for them.

1162. Do you get much food from the other establishments? No, very little.

1163. What do you get from the Cascades Asylum for the Insane? About half a pail of dirty water a day.

1164. Do you think that you get all the refuse from that establishment? I do not.

1165. Do you think that it would be an advantage if you got more? Yes; we could feed the pigs quicker, and keep more of them.

1166. Have you any trouble with the parents of the boys whom you license out? Yes; sometimes lads who have had good situations, and who have been getting on well, have been enticed away to town by their parents, and are in danger of falling into evil habits.

1167. What do you do under these circumstances? If the boy's time has expired we are powerless to act.

1168. Can you recommend any means by which this evil could be remedied? I would recommend that the Superintendent should have control over the lads until they reached a certain age. It is well to have a hold on some of the lads under circumstances such as I have mentioned.

1169. *By Mr. Brown.*—Is the Institution purely a Government one—are other lads there beside those who are sentenced? No.

1170. Are they treated as prisoners, and led to believe that they are prisoners? No, certainly not. We avoid the prison system entirely.

1171. Do you classify the boys at all? It is almost unnecessary; but they have separate bedrooms.

1172. Do you keep night-watches? Yes.

1173. Are any of the old men from the Invalid Dépôt employed about the place? No.

1174. With regard to amusements, do you teach the lads music? We made an attempt to get a drum and fife band; but we have no one at present able to teach them. We give them instruction in singing.

1175. Who conducts the school? I do.

1176. Have you any system?—are you under the Board of Education? We divide the lads into classes, and we have visits from the Inspector.

1177. Has a boy left the Institution lately for Campbell Town? Yes.

1178. Have you any other boys from Campbell Town? Yes, one or two.

1179. Is one of them rather difficult to manage? No.

1180. *By Mr. Dobbie.*—Do you think that the establishment is working satisfactorily? Yes.

1181. *By Mr. Lewis.*—Do the boys have any gymnastic exercise? They have bars, but no training.

MR. J. B. MATHER, *Manager and Secretary Boys' Training School, called in and examined.*

1182. *By Dr. Huston.*—What is your name? Joseph Benson Mather.

1183. What appointments do you hold in connection with the Boys' Training School? I am one of the Managers, and Honorary Secretary. Perhaps I may be permitted to say that there are seven managers, the Mayor, *ex officio*, being one of them. Meetings are held monthly, oftener if required. A report is furnished to each meeting by the Superintendent as to anything that has transpired at the school.

during the month, and the Secretary reports all that has come under his notice. A record is kept of all business brought forward. Visitors are appointed to see after the interests and management of the Institution.

1184. How long have you been in the position of Secretary? Ever since the Institution has been established.

1185. You are familiar with the internal working of the School? Yes; and from my own knowledge I can say that it is governed by "the law of kindness." The children are treated as a family, and every liberty is given them which is suitable. The Institution is what its name implies—a training school—not a gaol. There is an endeavour to divest it of every idea of a prison. Under such circumstances a peculiar class of officers is needed; and the Managers have been fortunate in their selection. One and all perform their duties satisfactorily. The Superintendent has a remarkable tact in the management of the boys, so that they seem to feel that he is their friend, and they love him, and are willing to do anything to please him. Some of them are allowed to go into town on Saturday afternoons, and they are invariably back at the time appointed. On the occasion of the jubilee nearly the whole of the boys were allowed to visit the town to see the various displays: all behaved well, and were back to time. The three work-masters—carpenter, gardener, and farm labourer—are married men with families, and they treat the boys kindly. According to the rules of the Institution no one is allowed to punish the boys excepting the Superintendent. In case of misbehaviour report is to be made to the Superintendent, who acts in the matter as to him seems best. Punishment has been rarely resorted to. Loss of marks has generally been sufficient in case of any impropriety. A record is kept of any punishment, and always reported to the Managers. The cook is a respectable widow, who acts also as Matron, and manifests a motherly care of the boys, sees after their shirts, socks, &c., mending them when necessary.

1186. It is supported by the Government? Yes.

1187. At what age do you cease to have control over the boys? The boys are admitted from 11 years old to 16. Our control over them ceases when their sentence expires,—it may be at 14 or it may be at 21. In the Annual Report which the Managers have just furnished to the Government, they have suggested the desirability of assimilating the Training Schools Act of this Colony with that of Victoria, which makes the children wards of the State until they attain the age of 21 years. The Managers think that such a measure would be a means of largely preventing the influence of vicious parents, and of enabling the Managers to continue their help and protection to the children until they have sufficient experience to protect themselves. Each boy, on his being licensed out, is provided with a good outfit, including a best suit, as well as his every day working clothes, there is, therefore, very little need for any outlay for some time; consequently his wages accumulate, which, in accordance with the contract entered into by the master, have to be forwarded monthly to the Secretary, when they are deposited in the Savings Bank to the credit of the boy. This of itself may induce habits of thrift. At the termination of twelve months or longer there is a considerable fund, which the parent looks forward to, and considers too large to be idle. Therefore, as soon as the boy's sentence has nearly expired the father writes to or visits him, and tells him that he must not re-engage with his master, but he must come home. The first intimation the Secretary has that the boy has come to town is the appearance of the father or mother making a request for his money. There have been several painful cases of this kind, which the Managers greatly desire for the future to prevent, and they think that if an Act is passed as proposed it may prove in every way advantageous to many of the boys.

1188. What is the result of your experience? The benefit conferred on the boys has been of a very marked character. They have behaved well, and there have been very few cases of absconding. The Managers have now the power of licensing them out at any time with the approval of the Chief Secretary. They can be sent out immediately after entering the establishment.

1189. Has this ever been done? Yes.

1190. After careful selection? Yes; but at the same time there have been instances where advice has been given by the Government which the Managers have thought it necessary to object to; but when they have explained their reasons for objecting, and have suggested a different course, there has been a willingness to meet the views of the Managers, and the greatest consideration and courtesy has been shown.

1191. In what direction? They have been asked by us to discharge boys, but we have invariably said that it would be better to license them out. There were two boys licensed out under these circumstances, and we have had considerable trouble with them.

1192. On the whole are the cases licensed out satisfactorily? Yes; in very few cases have we had to get the boys back again.

1193. Do they receive wages? Yes; the masters and I agree as to what wages the boys are to receive, and, as a rule, the money is forwarded to me, and placed in the Savings Bank to their credit.

1194. Is it desirable, in your opinion, to increase the number of trades that are taught at the school? The expenses would be considerably augmented by doing so, and the number of boys is very limited. We did wish to have tailors, but it would be necessary to have a tailor continually about the place to give them instruction. Our desire is to send the lads into the country as much as possible, and they then get rid of their old associates.

1195. Do you have many boys from the country? Yes.

1196. Do you send them, as a rule, back to the same parts? No; we do not license them out in the same districts.

1197. What proportion of the boys are employed at the Institution at out-door work? Fully three-fourths.

1198. Is the work changed for them? Yes; they are not kept constantly at the same kind of employment.

1199. From your knowledge do these boys become useful at the work they have been accustomed to? Yes.

1200. Do you think it desirable to apprentice them out soon after entering the establishment? That is the exception, and occasionally it may be desirable. There have been cases where the lads have been licensed out to their parents.

1201. Have there been any adverse reports in cases of that kind? No; in the first place they are licensed out for three months at a time, and, secondly, we are enabled to get information as to how the boys are being treated through the medium of the police, whom we have in our confidence?

1202. *By Mr. Dobbie.*—Would you, as a matter of course, license a boy to a parent upon application being made? No; we have only licensed two in this way.

1203. Do the parents apply frequently? No. Two applied lately, but we refused them on account of their unsuitableness.

1204. Have you sufficient control over those who are licensed out? Yes. The Superintendent keeps up a correspondence with them, which has a helpful influence.

1205. After their sentences are completed, what control have you over them? None at all.

1206. Do you keep a watch over their interests even then? Yes.

1207. Do you ever find them relapse into objectionable ways? No.

1208. Do you experience any difficulty for want of some sort of control after the sentences are expired? Yes; the chief difficulty is with the parents of the boys, who invariably try to get the money from them.

1209. Would it better to have these boys protected? I think so; and the managers have strongly urged that they be empowered to act as guardians until the boys reach the age of 21 years.

1210. Up to what age are the boys sent to the Institution? At one time they were sent up to 18 years, but it has been altered to 16.

1211. Have you found that alteration satisfactory? Yes, I quite agree with it.

1212. *By Mr. Lewis.*—By whom is the Board appointed? By the Government.

1213. Are you selected by the Board as the Hon. Secretary? Yes.

1214. Do you think the boys get sufficient amusements, privileges, and wages? Yes.

1215. Would you recommend any increase for good conduct? Yes; and I advise masters to do so, which I think is generally adopted. The boys' interests are studied in every particular.

1216. In your last report you suggested that a fund be provided for the boys who remain in their situations for twelve months after being licensed out: did you intend that this sum should be distributed in the form of prizes? The object is to keep them in the same situation as long as possible.

1217. Do you think as much good work is got out of the boys as there might be? Yes.

1218. Is it all properly directed? Yes.

1219. Could not some of them be taught farming at the Government farm, New Town? No; it would not be advisable to send them there.

1220. Do you think as much profit is made out of the farm as might reasonably be expected? Yes.

1221. *By Mr. Brown.*—Are the boys treated as prisoners? No; we always begin the good work by allowing them as much liberty as possible. Every week a certain number of boys are allowed to go out, and in no instance have they broken their trust.

1222. These boys are tried in the open Court, are they not, before being sent to the school? Yes, it could not be otherwise.

1223. Do you not think that sending them to gaol is very objectionable? Yes; the Managers have always objected to their being imprisoned at all; it has a most injurious effect.

MONDAY, MARCH 5, 1888.

THE CAMPBELL TOWN HOSPITAL.

DR. HENRY G. H. NAYLOR, *Honorary Medical Officer, Campbell Town Hospital, called in and examined.*

1224. *By Dr. Huston.*—What is your name? Henry George Harris Naylor.

1225. Will you state what connection you have had with the Hospital up to the present time? I was formerly Honorary Surgeon to the Hospital, and subsequently became Medical Officer, which position I held for nearly four years. I am now Honorary Medical Officer.

1226. How is the Institution supported? There are a few subscribers; the Government subsidise the Institution to a considerable amount, and also pay for the paupers separately.

1227. Is the subsidy a fixed sum yearly? Yes.

1228. What do the Government pay for the pauper patients? 2s. per day each.

1229. What do the subscribers pay? £1 a year, and for this sum they have the privilege of being patients once during the year.

1230. Is the Hospital provided with sufficient medical attendance? Yes. During my tenure of office Dr. Burn was honorary medical officer and I was medical officer; at the present time Dr. Lethbridge is medical officer and Dr. Burn and I are honorary medical officers.

1231. Is the medical officer paid? Yes; he receives £50 a year, out of which he has to provide medicines and appliances.

1232. What condition is the Hospital in? It is very dilapidated, and quite unfit for the purpose; but we have been obliged to submit to force of circumstances.

1233. Is it properly furnished and bedded? No; the furniture is very meagre, and I had to suggest to the trustees to get a spring mattress. I had nothing but a soldier's iron bedstead with meshes of rope.

1234. Do you think the management is satisfactory? Yes, far more satisfactory than it was before, when the managing trustee was simply the ruler of the whole concern, with the result that a great deal of unpleasantness was occasioned at that time. There is now a board of management, consisting of the clergyman of the district and several other gentlemen. The old system could not have been worse. I will mention one instance. A patient was admitted to the Hospital suffering from acute diarrhoea, and the man was exceedingly low and weak. I was informed by the managing trustee that the case was more fit for the Invalid Depot than the Hospital. I replied that it was hardly the thing to carry a "live corpse" about, and I considered the Hospital the best place for him. The man died a few days later.

1235. They interfered then with the medical management of the institution? Yes.

1236. That is not the case now? No.

1237. *By Mr. Dobbie.*—Do you, as a medical man, approve of the originally proposed site for the new Hospital? Yes; the objection has been raised that the noise of the trains whistling would disturb the patients; but they would get accustomed to that in a very short time.

1238. What is your opinion of the site where the present building stands? It is simply a bog in the winter time, and inferior to the site proposed.

1239. Do you think that steps should be taken at once to build a new Hospital? Yes, I would recommend that course to be adopted.

1240. *By Mr. Lewis.*—Will you explain what the present system is?—of whom is the Board of Management composed? The three Trustees, four gentlemen of the district, and the ministers of religion form a Board, who appoint a Chairman, Secretary, and Treasurer, by whom the immediate management is conducted; though, of course, before any alterations can be effected, the Board has to be consulted. Regular meetings are held for the purpose of consultation. In consequence of the unsatisfactory working of the old system to which I have alluded, the subscribers decided at the last annual meeting to change the system to a managing Board.

1241. Are the Trustees elected annually? Yes.

1242. What amount of subscription will entitle a subscriber to a vote? £1.

1243. Are the rules sufficient for the management of the Hospital? There is one rule which I object to, and that is the one giving power to the managing Trustee to do as he likes.

1244. What position does the medical officer stand in with regard to the Board of Management? He has full power in the management of patients, but is subordinate to the Board, inasmuch as he has to obey any instructions given by them in any direction. I have often been told by the managing Trustee not to admit a typhoid patient. I do not, however, think the present Board of Management interfere to that extent.

1245. What are the privileges and duties of the honorary medical officers? Their privileges are very ill-defined; their duties are *nil*.

1246. Do you think it advisable to draw up a new set of rules? Certainly it is necessary that new rules be drawn up defining the duties and privileges of the medical and honorary medical officers; and I think it is important that there should be a rule stating something definite as to the relations between the nurse and the medical officer.

1247. How many nurses are there at the Hospital? Only one, and during the last six months there has been nobody in the Hospital but this one nurse to do all the work but the cooking and washing. I have frequently had to submit to a great deal of unpleasantness in the way of insubordination.

1248. Do you consider the nurse competent? She cannot take the temperature of the body, and it is essential that a trained nurse should be able to do this.

1249. Do you think it right for even a small hospital like this to be left without any surgical appliances? It is not. It is the only hospital I know of where the surgical appliances have to be provided by the medical officer.

1250. Does it ever become a strain? Yes. The medical officer has sometimes to find expensive appliances, and it is very inconvenient not to have everything at hand.

1251. How is it that these things are not supplied? It has always been the rule that the medical officer should, for his £50, supply them when necessary.

1252. Are the medical comforts supplied? Yes.

1253. How is the cooking done? Very badly; I have frequently seen meals that have been quite unfit to eat. In my opinion an efficient cook is required.

1254. Have the patients ever complained? Yes.

1255. Have you seen the plans of the proposed new Hospital? I have seen Mr. Conway's plans, but not those prepared by Mr. Hunter.

1256. What is your opinion of Mr. Conway's plans? It would have been a very pretty building, as well as a complete and compact Hospital.

1257. What was the cost? £1500.

1258. Can you tell the Commission whether everything is done to make the friends and relations of the Government patients pay for their keep? As far as I know it is done. Strict enquiries are made into their circumstances.

1259. Do they ever pay? Yes, sometimes.

1260. What is the rate charged per diem? 3s. for paying patients; 2s. for Government patients.

1261. *By Mr. Dobbie.*—Practically the institution is kept up by the Government subsidy and what is paid for paupers? Yes, they are the main sources of revenue.

1262. And Government have no voice in the management? No.

1263. Do you think that is a good arrangement? I do not, and the same opinion is held by many people, who think that the Government should take the institution over, as it is virtually a Government one at the present time, though not so recognised. I wrote to the Government a short time ago, requesting that an inquiry be made into my dismissal, but received a reply to the effect that the Hospital was not a Government institution.

1264. Subscriptions would cease if it were taken over by the Government? Yes; but that would make very little difference per annum, and I think the Hospital would be better managed.

1265. *By Mr. Brown.*—Do you think that under the existing system the Government should have a certain amount of control? Yes; I think the Government should exercise a considerable amount of control.

1266. In your opinion, is it necessary, in view of the fact that there is a hospital in Launceston and one in Hobart, that there should be one in Campbell Town? Yes.

1267. Is Campbell Town the most suitable place for such an institution? Yes? Since the Fingal Railway has been opened it has made a difference in the number of patients, because people go into Launceston; but still there are midland patients, for whom Campbell Town is the most desirable place.

1268. If this particular institution did not exist, would you select Campbell Town as the place for a third hospital? I would not deny a certain prejudice, but, in my opinion, it would be the best place. The locality has the greatest claim also.

1269. *By Mr. Lewis.*—If there were no hospital here, do you think the Government should establish one? Yes; it is a great necessity.

1270. *By Mr. Brown.*—Should the Government have a voice in the selection of the site for the new building? Yes.

1271. Can you recommend any better site than the one originally proposed? No.

1272. Objection has been taken to the drainage: what is your opinion with regard to that? The drainage need never go into the river; it can be taken through a culvert into a different place.

1273. Is it proposed that the new hospital shall be fitted up properly and completely? I think it is going to be managed on the same principle as it is at the present time.

1274. *By Mr. Lewis.*—Has the Medical Officer a seat on the Board of Management? No.

1275. Have the honorary medical officers any voice in the management? No.

DR. R. W. LETHBRIDGE, *Medical Officer, Campbell Town Hospital, called in and examined.*

1276. *By Dr. Huston.*—What is your name? Robert William Lethbridge.

1277. What position do you hold at the Campbell Town Hospital? I am the Medical Officer in charge.

1278. How long have you held that position? Since last November.

1279. What condition is the present Hospital in? The building is very old and generally unsuitable; it is furnished very badly, and altogether in a most unsatisfactory condition.

1280. Are there any medical appliances? No, except a few splints. The medical officer has hitherto supplied all appliances.

1281. What salary do you receive? £50 per annum, out of which I have to furnish drugs, &c.

1282. Why should the present state of things exist—have they no funds? They have funds which have been collected for the purpose of building a new hospital, and it is not considered advisable to furnish the old one at present.

1283. Do the subscriptions come in freely? I believe there has been a great difficulty in raising sufficient funds to claim the Government subsidy, but the requisite amount has been made up hitherto.

1284. What kind of nursing staff have you? There is one nurse at present, who is also matron, and she does all the work with the exception of the rough work, such as cooking and scrubbing.

1284A. How do you manage when extra nurses are required? They are hired specially.

1285. How are the special nurses paid? Out of the hospital funds.

1286. Do the Trustees work amicably? Yes; they have no difficulty at all.

1287. What is the average number of cases treated at the Hospital during the last 10 years, and the number of deaths?

Year.	Admitted.	Died.
1878.....	57	4
1879.....	50	3
1880.....	43	3
1881.....	37	1
1882.....	53	4
1883.....	58	6
1884.....	54	3
1885.....	45	4
1886.....	33	1
1887.....	35	4
TOTAL.....	465	33

Average for 10 years—Admitted, 46½; died, 3½.

1288. Are you well supplied with medical comforts? Yes; there is not the least difficulty in getting anything that the patients require.

1289. What is your opinion of the site for the proposed new hospital? The site looking towards Riccarton is a good one, although some objection has been taken to it on the ground that the patients would be disturbed by the whistling of passing trains, but they soon get accustomed to that.

1290. *By Mr. Lewis.*—Do you think the Board of Management is constituted of the most favourable elements? I think so.

1291. In your opinion should the honorary medical officers be members of the Board? I should think not. I hardly know how it would work.

1292. Is one nurse sufficient to work the Hospital properly? In my opinion the old system of master and matron, or a man and his wife, is better than having one nurse and calling in extra nurses when they are required.

1293. Does the present nurse do her work satisfactorily? Yes.

1294. From whom does she receive orders? With regard to the patients she receives her orders from me; but the Chairman of the Board of Management gives her instructions as far as her duties as matron are concerned.

1295. Does she do the cooking? No, a regular cook is employed.

1296. Have you noticed the patients getting their meals? Yes, sometimes.

1297. Has the food been properly cooked? Yes, moderately well; but one great objection I have to the present hospital is that there is no dining-room for convalescent patients, and they are obliged to have their meals where there is very little furniture.

1298. *By Mr. Dobbie.*—The first requisite is a new hospital, is it not? Yes, undoubtedly; and it should be proceeded with at once. I would suggest that it be provided with a small convalescent room.

1299. Are there sufficient funds to build the hospital? There is £2200 at the present time, and the land has been purchased.

1300. Do you know why the building is not proceeded with? There are, I believe, little jealousies existing, and objection has been taken to the land on account of the whistling of the trains passing.

1301. Do you see any sufficient reason for the delay? No.

1302. As a medical officer do you recommend that the building be proceeded with at once on the land that has been purchased? I do.

1303. *By Mr. Brown.*—Are the majority of cases treated at the hospital the results of accidents? Yes.

1304. Do you not find that the residents of the township are very good to the patients? Yes, and it proves a great saving to the hospital.

1305. Why should not the honorary medical officers be members of the Board of Management? Because the sole privilege of the honorary medical officers consists of recommending three in-patients each to the Hospital during the year.

1306. Do you think that the appliances which are now supplied by the Medical Officer should be provided? Yes, it would be better.

1307. With regard to the delay in commencing the new building, do you think that the Government should take the matter in hand? Yes; there are now three interests concerned, and I think the Government should take some decided stand.

1308. *By Mr. Gill.*—Is the Board elected by the subscribers? The Board consists of three trustees, who are elected triennially by the subscribers four subscribers, who are elected by other subscribers, and the ministers of religion.

1309. Do you think the Boards work well? Yes. The same system works well in Queensland.

1310. *By Mr. Lewis.*—Do you think it would be advisable to dispense with the Hospital, and send the cases to Hobart or Launceston? It might be done; but it has always been looked upon as a place to send people from the midland districts.

1311. *By Dr. Huston.*—Is Campbell Town a desirable place for the Midland Hospital? Yes.

THOMAS H. POWER, *Chairman Campbell Town Hospital Board of Management, called in and examined.*

1312. *By Dr. Huston.*—What is your name, and what position do you hold with regard to the Campbell Town Hospital? My name is Thomas Henry Power, and I am Chairman of the Board of Management.

1313. Of whom does that Board consist? Four subscribers, three trustees, and all the ministers of religion in the district.

1314. How long has the Board been in existence? Since the 20th February, 1888.

1315. Were you connected with the former Board? Yes.

1316. How was it managed? By three trustees, one of whom was the managing trustee.

1317. How is the hospital supported? By voluntary subscriptions; the payment of patients at the rate of 3s. per diem; 2s. paid by Government for each pauper patient; and a grant of £200 per annum from the Government.

1318. What conditions are attached to this grant of £200? A certificate to the effect that two amounts of £75 or £150 has been collected from other sources.

1319. With the assistance of your interest on deposits, have you hitherto been able to raise the requisite amount? Not always; but we are allowed to alter the certificate from "subscriptions" to "other sources."

1320. Have you made use of the interest on the subscriptions that have been paid toward the Building Fund? Yes, the interest on £500 was included in "other sources."

1321. By whom is the staff of your Hospital managed? By the Chairman of the Board of Management and the medical officer. We have a Matron, who is also the nurse; and there is a woman to do the rough work.

1322. Does the Board work well with the medical staff? We have had no experience yet.

1323. Have your honorary medical officers a seat on the Board of Management? No; they have the privilege of putting in three patients during the year.

1324. Do you and the subscribers approve of the site that has been purchased for the new Hospital? Yes; it is approved of by the majority of the subscribers.

1325. Are you of opinion that the new building should be commenced at once? Yes.

1326. How are the provisions supplied to the Hospital? There is a fixed dietary scale, and the Chairman signs the orders every Friday morning for the provisions. It is not worth while calling tenders for the supply.

1327. *By Mr. Dobbie.*—What is the cost per annum of maintaining the Hospital? £450.

1328. Are you able to carry on the institution without getting into debt? Yes. I may mention that the Auditor raised an objection to the other "sources," but we were able to show that for ten years we had collected over and above of £300, the required amount of subscriptions.

1329. At present is the income sufficient to keep the institution going? I am quite certain that we could pull it up again.

1330. *By Dr. Huston.*—What was the amount of your actual subscriptions last year? £67.

1331. *By Mr. Dobbie.*—In reality the principal part of the cost of, or the maintaining the Hospital, falls on the Government? Yes; something more than half.

1332. What voice has the Government in its management? None at all.

1333. Do you think that the Government should have a representative voice? Yes, they are entitled to it. It has been suggested that the Hospital should become entirely a Government institution.

1334. Would you approve of that step? No; I think it is more satisfactory as it is. It has worked well for over 30 years.

1335. Do you think that if the Hospital were built now there would be any difference in the subscriptions? Yes; I think there would be more money from that source.

1336. Would there be an increase in the number of paying patients? Yes, I think so.

1337. *By Dr. Huston.*—What benefits do the £1 subscribers receive? Medical attendance for themselves and families, and also medicines.

1338. *By Mr. Lewis.*—What is the rule with regard to Government and paying patients?—is every patient paid for? If a patient cannot pay himself the Government pay for him; but we have had to take proceedings to recover money from patients.

1339. Are patients admitted first, and Government called upon to pay for them afterwards; or is it necessary to obtain an order from the Administrator of Charitable Grants? They are admitted first, and the circumstances of the relations and friends inquired into afterwards. If they have no friends or relations, then the Government pay at once.

1340. *By Dr. Huston.*—Who reports these cases? The medical officer.

1341. *By Mr. Brown.*—What guide have you taken to draw the new rules up? We have taken the old rules and altered them, introducing new rules that experience has suggested. We have studied the rules of the General Hospitals also.

1342. What steps have been taken towards the erection of the new Hospital? The money is in the bank, and the plans are in the hands of the architect, Mr. Fagg.

1343. Do you know whether it is the intention to build separate fever wards? Yes.

1344. Will that add very much to the cost of the building? Yes, but the subscribers insist upon it.

1345. How many patients will there be accommodation for? I do not know.

1346. Will surgical appliances be supplied? The subject has never been broached yet.

1347. *By Mr. Gill.*—Do you think a better site could be found? No; we have gone carefully into the matter.

1348. Do you think the Medical Officer is adequately paid? No; he is very badly paid.

LIEUT.-COL. LETHBRIDGE, *called in and examined.*

1349. *By Dr. Huston.*—What is your name? Christopher Wallis Lethbridge.

1350. You have been connected with the Campbell Town Hospital for many years? Yes, for 14 years.

1351. In your opinion, is it necessary that a new hospital should be built? Yes; the old one is in a very dilapidated condition, and the work should be proceeded with at once.

1352. Which site do you approve of? That in East-street, looking towards Riccarton.

1353. Are you on the Board of Management? No.

1354. Do you know anything of the present system? No; there is a new board, and it has not got into working order yet.

1355. Has the establishment of the Hospital at Campbell Town been a success? Yes, decidedly.

1356. Do you think Campbell Town is the most appropriate place for a midland hospital? I do. Campbell Town enjoys advantages superior to other midland townships, being situated at the confluence of many important roads, and being widely known as the possessor of a hospital for more than 30 years.

1357. As far as you know, has the general management been satisfactory, and have the patients been well cared for? Yes.

1358. *By Mr. Lewis.*—Have you seen a copy of the old plans which were drawn by Mr. Conway and submitted to Government? Yes, they were prepared under my supervision.

1359. Do you approve of the new plans? No; I consider Mr. Conway's plans better. They are more economical, and also more complete, in being provided with a surgery and bathrooms. I think £2000 too large a sum to expend on a hospital for the midland districts. Mr. Conway's plan, as estimated by Dr. Smart, will accommodate nine patients, at an estimated cost of £1250.

1360. *By Dr. Huston.*—In your opinion, will more people take advantage of the new hospital than the present institution? Decidedly.

1361. *By Mr. Lewis.*—Should not another plan be drawn with a view to subsequent additions? I do not think it necessary; the building should be completed.

1362. *By Mr. Gill.*—Do you think the old plans meet the requirements of the district? Yes; five would be the maximum number of patients.

1363. Would not a nominee Board be better than the present elective Board? I think that it would be better if all the members of the Board were appointed by the Government.

N.B.—Architect's estimates are unreliable; say Mr. Conway's building costs £1500, the balance of £500 may well be expended in furnishing and appliances.

WEDNESDAY, MARCH 7, 1888.

LAUNCESTON BENEVOLENT SOCIETY.

EDWARD LEWIS DITCHAM, *called and examined.*

1364. *By the Chairman.*—What position do you occupy in connection with the Launceston Benevolent Society? I am Chairman, which position I have held for over 15 years. I have been a member of the Committee continuously for upwards of 30 years.

1365. What subsidy do you receive from the Government? £250 unconditionally, and £250 additional conditionally on our collecting a like sum.

1366. Is that carried out every year? Yes; the conditions are fulfilled and we get the full amount.

1367. Have you power to nominate from the Benevolent Society to the Invalid Dépôt? Not directly. If I make out an order for admission of an invalid to the Dépôt it is submitted to the Police Magistrate and forwarded by him. I have complained of that.

1368. What do you complain of? I think my order ought to be sufficient. It is sufficient for admission to the Hospital, and should be so for the Dépôt.

1369. What is the effect of your order being submitted to the Police Magistrate? It causes delay. Many of those invalids come in from the country, and the Society has to support them until they are admitted to the Dépôt.

1370. What is the extent of the longest delay so caused? I cannot tell, but I find it entails a considerable expense to the Society. I recently asked Mr. O'Boyle to give me permission to telegraph to the various police offices in the country to inquire into the circumstances of persons coming from the country and applying for relief. This has been granted, and I hope it will obviate a great difficulty, and when the accommodation now being provided in the Dépôt is completed we will be all right.

1371. Has the Police Magistrate ever refused to recognise your order for assistance from the Society? We do not send any cases to him; he sends them to us.

1372. Has there ever been friction between the Police Magistrate and the Benevolent Society? We have very little to do with him; we treat with Mr. O'Boyle.

1373. Have the authorities ever refused cases recommended by the Society? I cannot say that they have ever refused, but there certainly has been friction. I am now working directly with Mr. O'Boyle, and am quite satisfied. I have been so insulted by the Police Magistrate that I have been compelled to have nothing to do with him.

1374. If you desire to send an invalid to the Dépôt, what procedure do you adopt? I make out an order and the authorities can do what they like with it, but I communicate direct with Mr. O'Boyle. I do all the business of the Society through Mr. O'Boyle. Our Secretary has written instructions that all cases, before relief is granted, must be represented to me, and then I go into the matter with him. Previously I had to submit the cases to the Police Magistrate, but I now have permission to submit them to Mr. O'Boyle.

1375. If you want to get anyone into the Dépôt have you to communicate with Mr. O'Boyle? I make out an order, and I believe it has to go through the Police Magistrate. When I complained to Mr. O'Boyle that my order should be sufficient he told me it was done for the purpose of obtaining a record which might be kept at the Police Office.

1376. You do not send cases into the Dépôt to relieve the Society unless it is in the case of old persons? No. If it is the case of an old person who has friends, and who does not wish to go into the Dépôt, we do not force them. We think it better, if a man or woman can earn enough to pay their rent, to give them a ration, which costs about 2s. 6d. per week. If they went into the Dépôt it costs about 8s. We keep them out of the Dépôt if we can, to save the Government, but if they are confirmed drunkards and a nuisance we send them to the Dépôt; but we never attempt to separate man and wife.

1377. Do you recommend the granting of outdoor relief? Yes.

1378. How is that done? Cases are generally sent to us by the police. Say a woman's husband has left her and she is ill; she applies to the Police Magistrate, and he sends her to the Benevolent Society. We get her an order to the Hospital, and then the children are dealt with by boarding them out, but we have no means to pay for farming out children. We have not the distribution of any charitable grants. The Police Magistrate sends us cases that the police should deal with in such cases.

1379. Has the Benevolent Society power through themselves to give to any poor people outdoor relief? No; we can recommend. I recommend to Mr. O'Boyle, who deals with the case on my application.

1380. Have you power to issue an order for monetary relief? No; we can only recommend.

1381. Is there any provision for boarding out children? Formerly we had no power to farm out children. If we did so, possibly we would have to pay for their keep, but that has been altered now. I am allowed now to deal with these cases, and the Government pay the costs. Mr. O'Boyle and I work very well together.

1382. *By Dr. Huston.*—What is the cost of the management of your Society? We now pay the Secretary £104 per annum; previous to last month it was only £75. Now we have his entire services.

1383. What relief do you give to persons before they are admitted to the Dépôt? We give no money. We arrange with a lodging-house keeper, who keeps them for 6d. a night, and we give them three or four days' rations.

1384. Have you any permanent paupers to whom you give either money or rations? Yes; we keep cases on our books permanently. We have now some outdoor cases that we have had on our books continuously for 20 years. We supply firewood, blankets, &c., besides rations, but no money.

1385. *By Mr. Dobbie.*—What staff of officers have you? Only the Secretary.

1386. Is he paid out of the Society's funds? Yes.

1387. How do your subscriptions keep up? We have always exceeded the required £250. We pay a collector commission for collecting our subscriptions. Taking the last 10 years the subscriptions keep about the same.

1388. *By Mr. Lewis.*—Is your Secretary the Enquiring Officer? He makes all necessary enquiries into the Society's cases. Every three months he produces a list of all recipients of the Society, with full particulars, and he is supposed to personally visit every case during the three months.

1389. Can he obtain information as readily as the police? I think so; but we get information also from the police.

1390. Does Mr. O'Boyle ever consult with you as to the recipients of charity? Yes.

1391. Would it be possible for any person to receive aid both from the Benevolent Society and Mr. O'Boyle? They do. I am furnished with the list of all recipients of the charitable grants in Launceston, and when Mr. O'Boyle wants information of a special nature he writes to me.

1392. Is there any abuse under the dual system?—is it possible for recipients to obtain more relief than they should? We are liable to be imposed upon, but we soon find it out. It cannot exist very long.

1393. How do recipients of the Society obtain their rations? We have eleven members on the Executive Committee, all of whom issue tickets. We meet every Wednesday, and each member has so many cases on his list, and he supplies those on his list with the tickets they are entitled to. We contract with grocers, butcher, and baker, and they receive the tickets from the recipients.

1394. Do you think it necessary to have a lying-in hospital in Launceston? It would save the Society a great deal of trouble.

1395. How many cases have you yearly? Last year there were about six.

1396. Are there sufficient cases in Launceston to warrant the expense of an institution of that kind? No, I do not think there would be. We have dealt with them for many years, and I think we can continue to deal with them.

1397. *By Mr. Dobbie.*—Is the Hobart system of dispensing charitable aid a good one?—or do you approve of the Benevolent Society being quite apart from the charitable grant which is distributed through the Administrator? It would put a great deal of work on the Society to make us carry out the distribution of compassionate allowance and the management of boarding out children.

1398. Which system do you prefer, the dual or separate? There must be a jealousy under the Hobart system, as there was here when we worked with the police.

1399. If a lump sum were handed over to your Society every year, the whole of the matter then being left to the Society, would it be preferable to the present system? It would answer well, but would involve a great deal of work on the Chairman of the Society. I do not think a chairman would undertake it.

1400. He would necessarily be a paid officer? I do not think the system now carried out in Launceston could be much improved. Now that I deal direct with Mr. O'Boyle things work satisfactorily.

1401. If the lump sum for compassionate aid were handed over to your Society, would it affect the benevolent public who now contribute to the Society? I do not think it would have a good effect; people would probably think that we got sufficient funds from the Government, and that we had no claim on their benevolence. We are now working pretty well.

1402. *By Mr. Gill.*—Do you think it desirable in any case for the Government to distribute money instead of rations? So far as the Government is concerned it is necessary. For instance, there may be a widow with a large family of small children; her rent must be paid. In some cases it is certainly necessary to give money.

1403. *By Dr. Huston.*—In that case recipients would get relief from both the Government and the Society? Yes; but we give rations only.

1404. What is the largest amount given? The Government give 2s. 6d. for each child between the ages of two and twelve years. The amount depends a good deal on circumstances.

1405. *By Mr. Gill.*—Do you approve of the boarding-out system? Yes, when proper care is taken in the selection of foster-parents and in looking after the children; but it requires great care.

MR. HUGH FRASER *called in and examined.*

1406. *By the Chairman.*—What position do you occupy? Secretary of the Launceston Benevolent Society.

1407. How long have you occupied that position? For two years.

1408. What are your duties? To visit all the cases on the Society's books, to keep the books, report all cases to the Chairman, and seek advice on cases which I lay before the weekly meetings.

1409. When you meet a case of destitute children, what do you do? It is my duty to enquire into the case, and communicate with Mr. Kirkland, enquiring officer on behalf of the Government.

1410. In cases where you find that outdoor relief direct from the Government is necessary, what steps do you take? I communicate with the police clerk, who communicates with the police magistrate, and he sends the facts of the case to Hobart.

1411. From your experience do you approve of the boarding-out system being generally carried out? Yes.

1412. Are there many cases within your knowledge in which such system is necessary? We have now five or six cases on our books. There are ten children here boarded out by the Government.

1412A. When you report a case to the Government is the result satisfactory? There is a great deal of delay.

1413. Could you board out more children at 6s. per week? I do not think we could. The remuneration is not sufficient.

1414. Are there sufficient cases in Launceston to warrant the establishment of a lying-in hospital? No.

1415. *By Mr. Dobbie.*—How do you discriminate between the cases you help and those you turn over to the Government?—what principle do you act upon? If a child is destitute we turn it over to the Government.

1416. Are children alone turned over to Government? A case comes before us to supply persons with food; if they have not sufficient means to pay rent we recommend that they receive compassionate allowance; whenever a case requires monetary assistance, we recommend it to the Government. The Society never gives money.

1417. Are those the only cases in which persons receive aid from both the Government and the Society? Yes.

1418. Is there any possibility of persons receiving aid without your knowledge? I think not. The police make out a list monthly of all those who receive aid from Government, and I get the list.

1419. What is the largest amount paid to an individual in Launceston by the Government? 10s. per week.

1420. Do you assist also in that particular case? Yes; it is a woman with a large family.

1421. Do you think the dual system of aid is abused in any way? I think it requires the very closest watching. I have known cases where the dual system has been abused. As soon as I find it out I report the case, and it is stopped.

1422. In Hobart the Society distributes the whole of the Government aid: do you think that a good system? It seems to be very complicated. I would not approve of it for Launceston. I do not think it would work well here.

1423. How would it affect the private subscriptions? I think it would have a very bad effect indeed. The Society would be treated as a Government institution, and I am sure our subscriptions would fall off almost, if not quite entirely.

MR. ROBERT MARSHALL *called in and examined.*

1424. *By the Chairman.*—What position do you occupy? Town Missionary in Launceston.

1425. Are you brought into contact with those requiring charity? Yes, a very great deal.

1426. Do you find many cases in which necessary charity cannot be obtained either from the Benevolent Society or the Government? No; there are not many cases that do not receive help from one of them. I have never known a deserving case in Launceston that did not find ready help.

1427. Would you recommend the boarding-out system for children? I would, if very great care were taken in ascertaining that the foster mothers were proper persons; but when girls come to an age when they can be admitted to the Industrial School, they should be sent there. They there receive an education to fit them for their after life. At present they sometimes get into hands that they would be better away from.

1428. How are children admitted to the Industrial School? They get an order from the Police Magistrate.

1429. From your experience can you suggest any improvement in the present mode of distributing the Benevolent Society and Government Grants? I do not think I can; I think they are conducted very well, and I cannot see where much improvement could be made.

1430. Do you think there are sufficient cases in Launceston to warrant the establishment of a lying-in hospital? I should not recommend it. I do not think there are sufficient cases to warrant it, and they can be very well treated under the present system. The Benevolent Society allow 5s. per week for someone to board them and act as midwife.

1431. Are your recommendations for assistance always attended to? Yes, always.

1432. *By Dr. Huston.*—Do you know of any case where families are receiving relief from the Government and Benevolent Society also? Yes. In every case where there is a widow with children they receive help from both. The Government only give relief to those who are receiving rations from the Society.

1433. In the case of a large family what ration do they receive? I think a double ration is the largest.

1434. What is the largest sum received by such from Government? I think it is 2s. 6d. per week for all children unable to work. I think the general allowance is enough to pay the rent. I do not know of allowance being made for more than three children.

1435. *By Mr. Lewis.*—Is it possible to get milk, arrowroot, &c. for children from the Benevolent Society? No; only meat, tea, bread, and sugar. In some cases they get oatmeal, and if anyone gives other things to the Society they are served out as far as they will go.

1436. Do you think the contract system a good one? I do not know if it could be improved,

1437. *By Dr. Huston.*—What is the quality of the rations issued? They are good, as a rule.

1438. Do you ever find cases in which imposture is practised? Yes; but it is soon detected and remedied. Some recipients from both the Government and Society are found to be unworthy, and help is at once discontinued.

MR. ALEXANDER KIRKLAND *called in and examined.*

1339. *By the Chairman.*—What position do you occupy? Enquiring Officer in connection with the Charitable Grant at Launceston.

1440. Do you get many cases from the Benevolent Society? No. The custom of the Benevolent Society has been to report cases to the Police Magistrate, who then instructs me to make enquiries.

1441. To whom are you responsible? To the Police Magistrate as an Officer of the Government.

1442. Do you enquire into those cases personally? Yes.
1443. Can you give the Commission any idea of the number of cases you have? I have 53 adults and 19 children on my books at present.
1444. Is much money given? The expenditure for adults per week is £11 5s. 6d., and for children £5 11s.
1445. Are many of them old cases? Yes. A number of them are very old people (man and wife), who get about 5s. per week for the two. The whole of this amount is given in cash. The Benevolent Society give rations.
1446. Do you find any difficulty in connection with the Benevolent Society? None at all. I always find that they give me all possible information, and I do the same with them.
1447. Is there any chance of recipients imposing on you and the Benevolent Society? It is part of my duties to make enquiries, and I work with the Society.
1448. Do you report to the Police Magistrate? Yes, and he forwards the report to Mr. O'Boyle. I personally investigate every case, enquiring into the condition and habits of each case. If I find that the relatives are able to support them I report accordingly, and the relatives are bound to support their poor relations.
1449. *By Dr. Huston.*—How many cases have you receiving dual aid from the Government and the Society? Forty-nine. All the adults on my books are receiving aid from the Benevolent Society. We give about sufficient to pay the rent, and perhaps fuel; the Society gives rations.
1450. *By Mr. Lewis.*—Do you pay the landlord the rent? No. We pay the money to the people themselves, but I think it would be much better for us to pay the rent and take the houses. You would then know that proper accommodation was provided.
1451. Have you had any cases of abuse of your charity by the money given being spent in drink? Yes, two cases. I reported them to Mr. O'Boyle, and they were struck off.
1452. Is there any visiting committee for the boarded-out children? Only myself. I visit them, and see that they attend school.
1453. How often do you visit them? Perhaps once a week. I am also employed as bailiff, and my avocation takes me all round the town, consequently I drop in to see the children at all times.
1454. Do you find that the children are well taken care of? Generally.
1455. Is the money for their keep paid through you? No, through the Police Magistrate.
1456. Are the children compelled to attend school a certain number of days per week before the foster-parents receive the money for their maintenance? We give the children tickets, and they have to be signed by the schoolmaster.
1457. What course would be taken if those children were not sent to school? I report the case to Mr. O'Boyle, and he would probably set it straight in a short time.
1458. *By the Chairman.*—Do you recommend through the Police Magistrate for admission of invalids to the Dépôt? No; I have nothing to do with that.

MR. ALFRED JONES *called in and examined.*

1459. *By the Chairman.*—What position do you occupy? Superintendent of the Invalid Dépôt, and have nominal charge of the Contagious Diseases Hospital. The Medical Officer has practical charge of the latter.
1460. With regard to the male and female invalids under your charge, are you hampered for room? We have no accommodation in Launceston for female invalids other than the gaol; we have accommodation for 144 male invalids. At the gaol and dépôt we accommodate 144, of whom 27 sleep in the gaol.
1461. Do you think they are overcrowded in the sleeping apartment? I think there is sufficient accommodation for those we have; but we require further accommodation for those who are seeking admission, and who now have to be sent to Hobart.
1462. Do you have more applications for admission than you can provide for? Yes.
1463. Would it be more desirable to keep here those whom now you send to Hobart? I think it much more desirable. There are many men who require only temporary relief,—men suffering from temporary ailment,—who, after two or three weeks' treatment and rest, may recover. If I have no accommodation for that class they are sent to Hobart at the cost of the country, and, as they are then so far away from home and friends, it is a question whether they will not become permanent inmates and a burden to the country. In many instances they would be taken back by their employers if not too far away.
1464. Is any provision made to pay their fares back to their districts? I think not. The distance from Hobart is too long for them to walk back, and I do not think the Government would care to convey them back. I have power to give them passes on the Government railways, of which I avail myself freely.
1465. From whom do the applications come? Mostly from the Police Magistrate in Launceston. Applications are made through the Administrator of Charitable Grants in all cases. If the Chairman of the Benevolent Society made application for admission of an invalid I could admit him, but the order would be sent to the Administrator afterwards. He always has to endorse it.
1466. Can you tell us the relative cost of maintaining invalids at Hobart and Launceston? I think the average cost for the last 17 years has been in favour of Launceston, although we had to pay higher rates for some things, such as water.

1467. Do you pay for water? Yes, to the Municipal Council, who charge us by meter. At Hobart they also had the residue of the Port Arthur stores. There is very little difference between the cost of the two establishments, but what little exists is in favour of Launceston. Both are less than the cost of the Melbourne invalids.

1468. Are your provisions supplied by contract? Yes, all.

1469. Do you find them satisfactory? Yes. This summer I have had to report the quality of the milk; but the drought has caused the supply to private persons to be also unsatisfactory.

1470. Have you sufficient accommodation for the sick? At times we have not. They have to sleep in the dormitories with the other men, causing them annoyance.

1471. Have you any means of classifying the sick? No.

1472. Are all the sick placed in one room? Yes; but a room is now being built which will accommodate about 35, and I will use it for classifying the sick.

1473. Do you recommend that the dépôt should be removed from its present site and placed out of town where more room could be obtained? I think it would be a waste of money to build at present, considering the present class of inmates. A very large percentage of them are Imperial prisoners, who will not be replaced.

1474. Have you any means of classification? I do so as far as practicable.

1475. Do you think it right that women invalids should be put in gaol? I do not think it is the proper place, but the objection is merely a matter of sentiment. Of course they are not prisoners, and I have available labour among the prisoners for attending on them, supervised by a free person. If a hospital were used apart from the gaol it would require a considerable amount of attendance, which would increase the cost.

1476. Is it not necessary to have properly trained nurses? Not at all. I have difficulty sometimes in getting wardsmen, but on the whole it works satisfactorily.

1477. Do you pay the wardsmen? Yes, nominal sums. I am allowed a wardman at 1s. per day. I employ thirteen at 4d. a day. Of course they are inmates, and are satisfied with the pay.

1478. Is the bathing accommodation and ventilation satisfactory? I have only one bath for the whole of the institution, and our hot water supply is deficient. Every man on being admitted has to be bathed, and if he comes in the evening they have to make a fire specially to heat the water.

1479. Is it necessary for the purpose of cleanliness to have better bathing accommodation? Yes, it is absolutely necessary that we should have better means of bathing. The kitchen also is deficient. At present we can only boil food. I have requisitioned for a stove, and hope to get one this year. It is an absolute necessity.

1480. Have you any difficulty in providing nursing for the sick? The medical officer's instructions are always carried out by me. A large item in the medical comforts is rum. The medical officer believes it does them more good than milk. Certainly they like it better, and it is cheaper.

1481. So far as the dépôt is concerned, can you suggest anything needing improvement? I do not know of anything at present. I will require extra assistance when the hospital is built. The men seem satisfied with the food and attendance they get. The clerk's salary is only £30 per year, and I have great difficulty in getting a sober man to carry out the duties.

1482. Would it not be better to have all the men sleeping in the dépôt? I would like to see them removed from the gaol to the dépôt, and provision made for young girls who are sent to gaol. We have no place for such girls, and the magistrates do not know what to do with them. We have no means of classifying them. The girls might be kept in the quarters where the invalids now sleep, instead of going to gaol with older and more confirmed prisoners.

1482A. Will you have the requisite accommodation when the improvements are carried out? No.

1483. Do you consider it necessary that the 27 invalid men now sleeping in the gaol should be kept in the depot? Yes, certainly; it now affords them opportunity of smuggling drink into the dépôt.

1484. In regard to the women in the Contagious Diseases Hospital, have you any means of exercising control over them? None whatever. I have no means of punishing for insubordination, and have experienced considerable difficulty thereby at times. Some of them have been very noisy, and I could not punish them for so being.

1485. Has the institution worked well? Yes; we have a very good officer in charge of them, but her position is a hard one. She can never leave the institution without employing a substitute, and her salary is only £30 per annum.

1486. Are the inmates allowed to be visited? Only in very rare cases? An attempt was made to allow ministers to visit them, but I objected to it.

1487. Do the women regard their position as a punishment? In many cases they have surrendered themselves, and have expressed their thanks that their positions were not made public. We have had some very bad cases there. Since October, 1886, we have had 50 cases, and some of them have been detained for 170 days. The average period of detention is 46 days, and the total number present was four and a half on an average. The report for 1887 showed that 3 remained in the Institution on January 1st, and 36 were admitted during the year, of which 30 were admitted for the first time, 5 for the second, and one for the third. Of the total 39 there were 35 natives. The average age was 22½ years; 20 being between the ages of 15 and 20, 11 between 20 and 25, 7 between 25 and 30, and one above the latter age. On December 31, only one case remained. The cost per head per annum was £33 14s. 4½d.

1488. Do people from other colonies become inmates of your institution shortly after their arrival? Not many. Some time ago such cases were more prevalent, but not during the last 4 or 5 years.

1489. Is the Act to prevent the influx of criminals and Chinamen carried out? I think the officers of the vessels and authorities are fully alive to that fact.

1490. Do you ever have cases of mothers and children being admitted to the dépôt? Only in two cases, which were emergency. I have taken in children temporarily whose parents were absent or in gaol, to prevent their being cast into the streets.

1491. Would children interfere with the working of the institution? Of course they would interfere with the management of the institution; they break the rest of the prisoners at night. Magistrates send children to gaol with their parents, although they have no power to do so, and if the children are not too old, I take them. We want a place very badly in which to keep children whose parents are in gaol.

1492. If the gaol were removed, would not further accommodation be required for the women paupers? Yes; we lose by the present arrangement. Suppose we admit a woman whose friends would be liable for her maintenance if in the dépôt, we cannot compel them to pay if she is in gaol, for it is not legally a charitable institution, although it is so practically. I refer to the invalid wards.

1493. Do you grow enough vegetables for the institution? Not nearly. The gardens have been so much curtailed, and the men are now physically incapable of doing work. The invalids cannot do the garden work now, and I have to utilise the prisoners.

1494. *By Mr. Dobbie.*—Do you ever get in gaol young girls, say from 14 to 16 years? Yes, sometimes.

1495. Are not they sent to the training school? No.

1496. Do you know why? No. The sanction of the Governors has to be obtained for their admission into the industrial schools.

1497. Do you think there should be an establishment in Launceston for the reception of such young girls? Undoubtedly. Many girls are now not sentenced because the magistrates will not send them to gaol. Such an establishment is required, more especially for girls whose parents are criminal.

1498. *By Mr. Lewis.*—How often does the medical officer visit the institutions at Launceston? Three times a week, and more if necessary. If not required he does not come.

1499. Does a week ever elapse without a medical visit? No. Since the Contagious Diseases Act came into force he always visits the institutions three times a week when there are cases under treatment.

1500. If you had an acute or malignant case, would you send to the Hobart Dépôt? I have sent a few cases, but generally they are treated here.

1501. If there were proper hospital accommodation in the Hobart institution to send there all such cases as cancer? Yes, decidedly. It would be quite sufficient to have one proper hospital in Hobart for such cases.

1502. Are the number of applications for admission to the Dépôt increasing? Yes, much to my surprise. They are generally men who have worked for many years on farms and cannot work longer, but in many cases after a rest they return to their labour.

1503. Would it be possible to have official visitors who would make periodical visits to the gaol and dépôt? My impression is that there should be one Government Inspector for the whole of the Government institutions.

1504. Would not honorary official visitors prove of service to you, and would they not prevent any abuses in Government institutions? Abuses could not exist in centres of population. We had such a Board here years ago, but they never had anything to do. It was abolished by the Government.

1505. You have said that the matron of the Contagious Diseases Hospital has to be in constant attendance—how would you remedy that? If the whole of that building were made, as it should be, into a reception house for young girls (I refer to the quarters now occupied by the male paupers and the old lodge and offices), I could then get an assistant who would relieve the matron. The matron is now practically locked in.

1506. *By Dr. Huston.*—What is the cost per head of your invalids? We bring in the gross expenditure for 1887 at £13 15s. 0 $\frac{3}{4}$ d. per head, the net cost being £13 7s. 2d.

1507. Have you any difficulty in collecting the supplementary assistance on their maintenance? No. We have a collector now, but it is not so well done as when done by the police.

1508. Does he collect on percentage? Yes; ten per cent.

1509. Have you many old men in the depot? Yes, a great number.

1510. Are they principally men who have been prisoners? Yes, most of them. On March 6 there were 148 males, of whom 117 are free by servitude, 16 came free to the colony, and 15 are natives. Of the 22 females 15 are free by servitude, 3 came free to the colony, 4 are natives, and 1 is a child,—total 171; 132 free by servitude, 19 came free to the colony, and 20 are natives.

1511. Are they classified? No; we have no means for classification, it is not possible. I think it necessary.

1512. *By Mr. Brown.*—Do you keep pigs? No.

1513. Why? It is contrary to the Health Act.

1514. What do you do with the refuse or offal? We bury it. We used to give it away, but people did not think it worth coming for.

1515. Do you think your numbers will be kept up by men from the tin mines? No.

1516. What salary is paid to the assistant at the dépôt? £90 per annum.

1517. Is house accommodation provided for him? Yes, provided by the Government.

1518. Is his house fit for habitation? Certainly not. It would, I think, have been improved long ago, but it was expected that the dépôt would be removed. I will recommend its improvement in the next estimates. His children suffer continuously from ill health, caused by damp rooms. His salary is small because he cannot do the clerical work, but he is a good officer. £30 per annum is now allowed for clerical assistance.

1519. *By Mr. Gill.*—Have you a dispenser? No; the medicine is dispensed from the hospital.

1520. Have you a storekeeper? I am storekeeper; all the stores are under my charge. The bread and meat are received from the contractor by the overseer.

1521. Could not the invalids be farmed out? I believe many of them could. Those that could do a little work, and a few shillings per week would induce settlers to take them.

1522. Would it not be better to send the girl prisoners to the institution at Hobart? Yes, but I know nothing of it. At present we have two girls in gaol, and it would be a great advantage to send them to a reformatory. I would suggest that additional property be secured at Glen Dhu. We have 10 acres there, and 15 adjoining acres are now for sale, and could be bought satisfactorily. Then the whole of the necessary buildings could be erected there, and the site of the present gaol sold. I believe the amount received from the sale would pay for the whole cost at Glen Dhu.

MRS. CELIA ELIZABETH PAUL *called in and examined.*

1523. *By the Chairman.*—What position do you occupy? Matron of the Launceston Gaol, and have charge of the female invalids.

1524. Do you think there is any difficulty caused by having the women in the gaol, which interferes with the discipline of the gaol? There is nothing objectionable.

1525. Do the women complain of being in the gaol? No, never.

1526. Do you tell off prisoners to attend to them? Yes, a nurse over each ward. It is considered an indulgence by the prisoners to get the position.

1527. Does it work well? Yes, better than any other way. The whole of the nursing is done by the women prisoners. There is a paid nurse under me; there are no other paid nurses.

1528. Have you sufficient bath accommodation? No, we are deficient in that way. We require a bath upstairs. Sometimes the invalids are physically incapable to walk up or down stairs.

1529. Can you suggest any other necessary improvement? I do not think anything could work better than now, except that we want a bath, and that we have to refuse many applications for want of accommodation. They remain on the Benevolent Society's books until they are sent to Hobart.

1530. Would it be better to keep them in Launceston rather than send them to Hobart, away from their friends? Yes, if it could be arranged.

1531. *By Dr. Huston.*—Have you any girls in the Institution? No; except deaf and dumb girls.

1532. Have you any girls in gaol? Two are under 18 years, and one under 20. They have all been there before. They were too old to be sent to Hobart.

1533. Do you ever get any girls under sentence whom it would be possible to send to Hobart? Yes, we get them for a few days for disorderly conduct. We keep them separate, and try to get them situations.

1534. Do you succeed in getting them employment? Yes, in some cases.

1535. *By Mr. Lewis.*—Do you know anything of the Hobart School? Yes, I know the Matron well, and have been through it. I think it has been open nearly nine years.

1536. Are girls sent there from Launceston or from country districts? Yes, two girls were sent recently from Launceston, but they went straight from the police office, without coming to gaol.

1537. *By Dr. Huston.*—Can you suggest anything for the better accommodation of your invalid women? Not without making different quarters and alterations.

ROBERT VENUS *called in and examined.*

1538. *By the Chairman.*—What position do you occupy? Resident Overseer at the Invalid Dépôt.

1539. How long have you occupied that position? Nine years and three months.

1540. Do you think you have enough assistance? The place is kept perfectly clean by myself with the assistance of the invalids.

1541. How many paid assistants have you? Only myself really; but fifteen invalids are paid trifles to assist.

1542. Do you find the system work satisfactorily? Yes, very well indeed.

1543. Do you think the invalids get sufficient attendance? Yes, I think they could not get better attendance.

1544. Do you think it necessary to have paid nurses? The habits of men are so dirty that no woman would remain there a week. They are very filthy sometimes in their actions.

1545. Would it be better to have all the men sleep in the dépôt? I think it would be much better to have them all together.

1546. Are they crowded? They are a little crowded in the gaol, but they prefer that to going to the Hobart Dépôt.

1547. Why? Most of them have never been there, and those who have do not like the Hobart depôt.

1548. If the accommodation were greater would you have more men? Yes, in winter.

1549. Have you sufficient baths? We have plenty of baths, but we want a hot water supply.

1550. Do you have much trouble with the men? Only when they go out on passes and get drunk.

1551. Do the Government provide you with quarters? Yes.

1552. Are your quarters satisfactory? Not at all. They are not healthy; the rooms are damp.

1553. Is there anything you can suggest in connection with the Depôt? I would like to get the range fixed which is in store.

1554. Do you issue rations to the women? Yes.

1555. Have your duties increased since taking your present position? Yes, very considerably.

1556. Has your salary been increased? No.

1557. *By Dr. Huston.*—If you got a new kitchen range would you obtain a hot water supply? Yes. We have difficulty in getting hot water; sometimes we have to light a fire specially to heat the water for bathing.

1558. What accommodation will the buildings now being constructed give? They are 60 × 32 feet, and will provide accommodation for about 40 men. Part of that will be a convalescent ward. We will then have accommodation for about 200.

1559. *By Mr. Gill.*—Are the rations satisfactory? Generally they are, but we have had to complain of the bread, and during the present summer the milk has not been quite satisfactory. Generally the food is good.

1560. *By the Chairman.*—Do you utilise the men's labour? Yes.

1561. If you had more ground could you more largely utilise the labour? I think not; they are very old and feeble.

THURSDAY, MARCH 8.

LAVINGTON GREY THOMPSON *called in and examined.*

1562. *By the Chairman.*—What position do you occupy? Surgeon-Superintendent to the Launceston General Hospital, and Visiting Medical Officer to the Invalid Depôt and Contagious Diseases Hospital.

1563. How long have you been at the Hospital? Six years.

1564. Have you regulations to go by? Yes.

1565. Has your report for 1887 been published? It was forwarded on February 15, but has not yet been issued.

1566. Are your regulations comprehensive? They are not complete. The rules of the New Norfolk Asylum are the best in the Colony. It would be well for us to have ours amended on that basis.

1567. Would you recommend that? Yes; I would recommend that our regulations be extended and revised very extensively.

1568. Are copies of the regulations showing the various duties hung throughout your hospital? No, none; the duties are not properly defined.

1569. Are you allowed to treat patients? I have my own patients in my wards, and Dr. Pardey has his. We treat them separately, but when necessary we co-operate.

1570. You have, then, separate interest in the patients? Yes. I have my interest and my responsibility for my patients, and Dr. Pardey has the same for his; although in reality I am responsible for the working of the entire Hospital.

1571. With regard to the honorary medical officers, are there any strained relations between you? None whatever; everything works smoothly.

1572. Is there anything you could suggest in this matter? I have studied the systems adopted in the different hospitals, and think a system might be adopted somewhat between the modes of the Hobart and Launceston Hospitals. In the Brisbane Hospital, the Surgeon-Superintendent, Dr. John Thomson, was about to give up his position because he was not allowed to treat patients. He was then made an honorary officer also, and allowed to have the same number of beds as the other honorary officers.

1573. Do you think that system a good one? I am sure of it. For instance, I do not think you will get any man with good qualifications to remain at the Hobart Hospital unless he is allowed to treat patients.

1574. How do you get on with the Hospital Board? We do not get on well with the committee work. We have two committees, but they do not meet regularly. I have recommended that they should have an acting board of management instead of a visiting committee. Often the visiting committee have not a quorum, and they frequently deal with business in town without visiting the Hospital or having a meeting. The Secretary simply writes out a report for them.

1575. What is the average cost of your patients? We are guided by the average daily number of patients. Dividing the number of patients into the gross cost of the Institution gives for 1886 an average cost of £69; for 1887 it will be about £71.

1576. With regard to the maintenance of the Hospital, how do you make up your estimates? We take the average of the two preceding years for the following year's cost. We have no fixed charge for patients. If it costs £1 per day to treat a case properly we charge it, but the average cost is about 3s. 9d. to 4s. per day. There is a maximum charge fixed by the Board, but we are never guided by that. It is *ultra vires*.

1577. Are the charges as high as they should be? Yes; we charge 3s. 9d. per day, but if patients have extras we charge for them. We are guided by the spirit of the Public Charities Act.

1578. Do you ever have Chinese patients? Yes, constantly.

1579. Do they pay? No. They come in and run up a score, and then clear. I have called attention to the fact, and Tom Sing, one of their leading men, said he would make a collection for the Hospital to pay off their debt. Two years afterwards, at a meeting of the Board, Mr. Weedon said a donation of £40 had been made by Tom Sing, which was to go to the Board's private funds. Of course it was irregular; it should have gone to the funds of the Hospital, being really payment for treating Chinamen.

1580. What has become of that money? It is now lying in the bank to the credit of Mr. Weedon, who is a member of the finance committee.

1581. Is that proper? No; of course the Audit Office would not allow it. Previously donations have been made, and we have generally obtained the money. If people are treated as paupers, and then give money to the Institution, it should be regarded as payment for their keep and go to the funds of the hospital. It should not be regarded as donations, for it is really part of the earnings of the Hospital.

1582. What about the interest? The Board make use of it, but it does not go towards our account.

1583. What becomes of the interest on the Chinamen's £40? It is used by the Board for additional items, &c.

1584. Do you receive prisoners? We treat prisoners, but the institution is not credited with them. We get fever patients and others from the gaol, but are not credited with treating them.

1585. Do you find your nursing staff and attendance satisfactory? Yes.

1586. Have you sufficient attendance? I think so.

1587. Are you satisfied with your bath arrangements, kitchen, &c.? Yes; we get nearly everything we require.

1588. How often do you make requisition for stores? Half-yearly.

1589. Do you think that a satisfactory arrangement? No, eminently unsatisfactory.

1590. What alteration would you recommend? I would recommend the abolition of the storerooms altogether, and the purchase of all stores regularly, as required. This would apply to drugs, blankets, &c.

1591. Have you a dairy? No; the milk is kept in wards contiguous to those used for patients. We should have a dairy.

1592. Have you any difficulty in repairing injuries caused by accident, such as breaking windows? We have no power or authority to do anything necessitating the slightest cost, consequently great loss results: for instance, up to 20th May, 1884, a water-pipe leaked at the rate of 112½ pints per hour, 84,000 gallons being lost before it was repaired. On January 14, 1885, water began to flow through a ceiling, and nothing was done to repair it till January 22, although reported at the time. The ceiling fell from this cause on July 7th of same year. I have constantly suggested that the storerooms be abolished, and stores purchased locally, as required. In regard to the donation from the Chinese, it was pointed out to Tom Sing that Chinamen were being treated at the hospital without their paying, and on January 14th, 1885, he promised to collect for the hospital, but on July 19th, 1887, Mr. Weedon stated at a meeting of the Finance Committee that a donation of £40 from the Chinamen was to go to the Board funds; of course it really belonged to the hospital, being a contribution for the maintenance of Chinamen. The want of supervision of the building has a very bad effect on its condition. On July 25th, 1885, a large circular pane fell out of the northern end of the building, and was at once reported, but nothing was done. On July 13th, 1886, it was again requisitioned for and repaired subsequently. It is extraordinary that so little attention should be paid by the department to the building; in fact we cannot get even the most necessary work done.

1593. Would it be beneficial if an amount were handed to you on your assurance that it would be expended only on urgent cases? I think so. In cases of emergency we should be allowed to get the necessary work done and report it to the Committee immediately, and they would at once report to the Government. It is imperative that some works should be done at once.

1594. Are there any honorary medical officers attached to the hospital? They are not regular attenders; we call on them when required.

1595. Would it be advantageous to have regular honorary medical officers? I think so. There was a difficulty between them before I took charge, and the system was abandoned, but I think it would be very desirable to have honorary medical officers.

1596. Can you suggest in any way how expenses can be cut down? I think not. We are very well equipped in every direction, and our expenses will diminish.

1597. Is the food supply satisfactory? On the whole very satisfactory. The bread sometimes is bad, but the public find the same cause of complaint.

1598. Do you sell the refuse? Yes. An account is made out monthly, and the receipts are credited to the institution.

1599. Is there anything you think the attention of the Commission should be drawn to? Yes, the extraordinary want of supervision of the buildings by the Public Works Department. It is impossible to

get the work done, however necessary, in anything like reasonable time. I called attention in 1883 to fissures which appeared in the building, but I could not get it repaired. Our hot-water supply should be good, but we lose a lot of heat owing to the pipes not being insulated. The piston of the hydraulic cylinder was five-eighths inch out of plumb, and owing to its not being set upright when reported, the barrel became so chafed that the cylinder had to be taken out and redrilled.

1600. Had there been proper supervision would this have been avoided? Yes; there is no supervision at all. I have been told by the men, that every man who has come to attend to drainage, instead of following the old channel, has made a new channel, and that the foundations are riddled like a rabbit warren. The foundations now require immediate survey.

1601. Would it be advisable to have a lying-in hospital in Launceston? I think it would be very unwise. It would be the means of drawing that class of people into Launceston.

1602. *By Mr. Dobbie.*—Are the whole of the patients treated by you and Dr. Pardey? Yes.

1603. Have the consulting medical officers anything to do with the patients? Nothing whatever.

1604. Are you acquainted with the Hobart system? Yes.

1605. Would you approve of that system here? Yes, to a considerable extent, but I am inclined to favour a mixed system between the systems adopted at Hobart and at Launceston. I think a good man being appointed to the Hobart Hospital should have beds of his own. It gives him an interest in the institution and places him on the same footing as the other honorary officers; but he should be responsible for the entire management of the institution.

1606. If stores were supplied locally would their cost be less or greater than those now supplied? The cost of the local supply would be greater in the first instance, but on the whole a saving on the yearly cost would be effected, because we would then only get what we required. There would be no waste, and there would be less clerical work. The present store-rooms could then be utilised for hospital purposes.

1607. Would you recommend an alteration to that effect? I think so. The system of supplying stores from the Colonial Storekeeper is very unsatisfactory.

1608. Do you not obtain anything for the hospital from other sources than the Colonial Storekeeper? Yes, we buy about £150 worth of drugs annually in the local market, and such things as leeches, which cannot be stored. The wines come from Hobart.

1609. Have you any funds to purchase those things? We have a contract with druggists and grocers for such goods.

1610. Are the wines satisfactory? The wine is very good now; the brandy is rather rough, but of satisfactory quality. The tea and sugar are not satisfactory. We get a very fair colonial wine now in bottles, but I think the whole supply should be obtained locally, as needed.

1611. Do you think it would be better to have a small sum at your disposal for repairs, or to get the necessary work done and then report it? The Government would never consent to give a sum of money for such purposes. I think we should be empowered to get necessary work done immediately through the Public Works Department, but when it has to filter through the Board's Secretary, and then through the Public Works Department, it takes a long time. It would be much better for the department to do the work immediately on our report.

1612. *By Mr. Lewis.*—Have you seen the rules of the Hobart Hospital? Yes; they are nearly the same as ours, but fuller.

1613. Do not they contain the detailed duties? Yes, but something further is required. I took a deal of pains in drawing up proper regulations, after studying the rules of various colonial institutions, and two years ago I forwarded a copy to the Board, who promised to consider them, but they never went into the matter.

1614. How do you define your medical duties? Dr. Pardey has one side of the hospital and I have the other, but if a patient comes into my side whom he has previously treated, he takes the case again, and I act likewise.

1615. How many members are there on your Board? Thirteen.

1616. How many Committees have they? Two; the Visiting and Finance Committees. There have been special Committees since I took charge, but they never meet.

1617. Does the Visiting Committee visit the Hospital? They visit the Hospital, but sometimes do the business in town without visiting our premises.

1618. Should not they visit the Hospital weekly? Yes, they should.

1619. How many medical men are there on the Board? There are three honorary consulting surgeons, and there is another honorary consulting surgeon who is not a member of the Board.

1620. Can you tell us approximately how often they are called in? Perhaps 12 times during the year; not more.

1621. Do you find any difficulty in collecting the maintenance fees? We do very well in that respect. I know, from local knowledge, nearly every person who comes into the Hospital. We have an Enquiring Officer, who does the collecting on commission, he is also House Steward.

1622. Are there many donations to the Hospital? Not many. £1000 was given by the late Henry Reed.

1623. In your Report for 1882 the Board recommend the appointment of two honorary dentists—was that done? No; the Hospital Act would have to be amended to permit of such appointment.

1624. Do you think such appointment desirable? I think it would be wise to have them.

1625. Have you many patients from the country? Yes.

1626. Do you consider it necessary to continue a hospital at the Midlands. I should think not ; now that we have railways through so many districts we can treat people at Hobart and Launceston from all parts of the Colony. It is nearly as easy to get to Launceston as to Campbell Town.

1627. Can you go to a local druggist for drugs on your own order, or have you to do so by requisition? I can do it on my own responsibility without requisition.

1628. Is the colour and material of the clothing supplied satisfactory? We specially selected it, the brown serge being made purposely for us.

1629. How are suspected lunatics treated at Launceston? In various ways; sometimes in the gaol, and sometimes in the hospital. We have no provision for them. Many plans have been prepared for a special ward for such purpose, but no requisition has ever been made for building it.

1630. Is it right to put them in gaol? They are better there than in the hospital, for we have no provision for them.

1631. What means have you for sending them to New Norfolk? We give notice to the Superintendent of Police, who communicates with the Police Magistrate, who in turn hunts up a Justice of the Peace to sign the necessary order. Then the Selby Police find an escort, and it is wonderful what a long time is taken to do these things. Meanwhile the man is at the hospital upsetting the arrangements, and seriously interfering with the working of the institution.

1632. How would you remedy that? By providing a proper reception house at the hospital? If we get a man suffering from *delirium tremens* it is not worth while sending him to New Norfolk, but he disturbs the patients of the hospital seriously.

1633. Have you no cells? We have two just under where the nurses sleep, and they are of such an extraordinary character that they are worthless. They have no conveniences.

1634. When you have the new building completed will this defect be remedied? Yes.

1635. Will it be attached to the hospital? I do not know. I drew up a plan for the building, but I do not know where it will be built.

1636. Have you told the Board where it should be? Yes; I have agitated for it for six years. I had thought it should be in the grounds of the hospital, but it is a question whether it should not be at Glen Dhu.

1637. If it were at Glen Dhu would it not entail considerable increase in the annual cost? Yes, it certainly would.

1638. Are railway passes issued to patients to allow them to return home after leaving the hospital? They are on the Government lines, but not on the Main Line. The patients have to pay on the Main Line.

1639. Have any complaints been made of that? No. Sometimes it is advantageous to the colony and the town to send a man home. It sometimes keeps them from getting into trouble.

1640. *By Dr. Huston.*—How many patients have you in the hospital? About 65. We have 92 beds, but a good many are vacant now.

1641. How many are males? About two-thirds.

1642. Have you many typhoid fever cases? We have 27 cases now; there have been upwards of 50 cases since 1st January.

1643. Have you any funds to distribute to poor patients on their discharge? Yes.

1644. How is that collected? Odd moneys come in sometimes by windfalls. We have not much.

1645. Do you get many complaints from patients of their treatment? Never.

1646. Are there any outside complaints from the public? There have been two or three in my time, all of which were investigated.

1647. Are complaints always investigated? Always.

1648. Are you in favour of honorary surgeons having each a certain number of beds to treat in the hospital? Yes.

1649. Would not there be friction between them and you? It did occur in former years, but that was because the Government servant was not allowed his fair quota of beds. There would be no jealousy if the beds were fairly distributed. I think the medical men of the town should be given an interest in the hospital.

1650. Do you think the honorary medical men of your Board would be agreeable to take beds? I could not say.

1651. Do you think those medical officers should be elected by the Board, or appointed by the Government? Elected by the Board.

1652. How many would you recommend to be appointed? About three.

1653. What is the purport of your Finance Committee? On every case that comes in I report to the Finance Committee, who decide the rate of fees to be paid, and report thereon to the Board.

1654. Have the Committee power to disburse funds? They have to pass all accounts, which then go to the Chief Secretary, who sends them to the Colonial Storekeeper, and he forwards them to the Audit Office. Their principal duty is that relating to fees. All the forms supplied by me are gone through, and the Committee decide what fees are to be paid by every individual patient.

1655. Have you lock wards in your hospital? Yes; we treat in separate wards all cases that women should not deal with.

1656. Have you many cases of that kind? We have ten beds, which are generally filled.
1657. What are your relations with the Board? Always amicable.
1658. Has there ever been any friction? Never, since I have been there.
1659. *By Mr. Belbin.*—How does the Board system work with your hospital? Very well.
1660. Do you think the Board should be nominative or elective? I think elective, as at present,—that is, the members electing new members when a vacancy occurs.
1661. Do you approve of that system? No; but I do not see what franchise you could get to elect the Board otherwise. Under the circumstances I think the present system is the best obtainable.
1662. Have you always found it to work well? Yes, always.
1663. Is the hot-water supply satisfactory? It is not satisfactory, because the pipes are not insulated, and there is a great amount of heat lost by condensation. It would be a great saving in fuel if the pipes were felted.
1664. Is the milk supply good? Yes, first class.
1665. Is it supplied by contract? Yes, and we boil all our milk.
1666. Would you approve of a lunatic asylum without a resident medical officer? It would be an extraordinary arrangement.
1667. Do you know the Cascades Asylum? Yes.
1668. Would you approve of that being left without a medical officer? I think it would be a most extraordinary arrangement.
1669. Do you conduct the correspondence of the hospital? The greater portion of it is conducted by myself.
1670. Have you a clerk of any sort? We have a storekeeper who acts as clerk. The Board have a secretary, and I write to the Board, and then the secretary copies it and sends it on.
1671. *By Mr. Lewis.*—Do you know the average cost per head of patients in the Hobart Hospital? About £90.
1672. How do you account for the cost being less at Launceston? Our building is better grouped, and can be worked more cheaply. The salaries paid at Hobart are wonderful. The new building there is beautiful, but badly arranged, and money is lost every day. I understand the present staff is necessary.
1673. *By the Chairman.*—Have you many patients for *delirium tremens*? Yes.
1674. Do they interfere with the arrangement and management of the institution? Yes, very much. They should be treated in a separate reception house.
1675. Are you visiting surgeon of the Invalid Dépôt and Contagious Diseases Hospital? Yes.
1676. Do the patients in the Invalid Dépôt get sufficient nursing? I think so. No woman who respected herself would go there to nurse.
1677. Is the system of male nurses sufficient? I think quite sufficient for that class of persons.
1678. Are the men too crowded for sanitary purposes? I think the arrangements are very good. The establishment is run very cheaply, but the arrangements are very good.
1679. Do you approve of some of the men sleeping in the gaol? It would be far better to have them all together.
1680. Are they obliged to have many medical comforts? A great many get rum; they prefer rum to milk, and it is cheaper.
1681. Would it be desirable to have more hospital accommodation to allow you to divide the malignant cases? It is very dreadful to have cancer cases amongst others; but it is a long way to send a man to New Town.
1682. Is the bath accommodation sufficient? I think so. It is very difficult to get the men to bathe. I believe there is a difficulty in getting hot water.
1683. Could not better arrangements be made for cooking? I think there is a range in store which was brought out for the Hospital. We do not want it now—it would suit the Dépôt perfectly, but it has been in store for four years.
1684. So far as the Dépôt is concerned, can you suggest any improvements? The accommodation is very rough, but fairly good, considering the class of inmates.
1685. Do you know the house Mr. Venus occupies? Yes. It is unfit for habitation. His children are always ailing because of the damp building.
1686. Is the Contagious Diseases Act working well? I think so.
1687. Are there any means of coercing refractory women? No.
1688. Should there be? Certainly there should be. The want of such power has been much felt, for one refractory patient makes the others troublesome.
1689. Have you had any serious trouble there from such cause? Yes, two.
1690. Have they sufficient attendance, and are they well looked after? Yes.
1691. *By Mr. Lewis.*—Do you think it desirable or necessary that there should be a trained male nurse to attend to the invalids? That would be an advantage.
1692. Is it a necessity? I think not, but it would be a great advantage.

1693. If there were a proper hospital ward at New Town would it be possible to send cancer patients and other malignant cases there from Launceston? It would; but it would be a great hardship to send them away from where they have been perhaps half a lifetime. It would, however, certainly be advantageous, and we would be glad to send them.

1694. Do you visit the dépôt regularly? I visit there three times a week unless I am not wanted. I visit them whenever required, and I give the same attention to the Contagious Diseases Hospital.

1695. *By the Chairman.*—Will the new buildings accommodate those invalids who are now sleeping in the gaol? I think so. I think that is the object of the building.

1696. Is there proper provision for the women? No.

1697. Are they comfortable at the gaol? I think so. There are no complaints either physically or morally.

1698. Are there official visitors for the dépôt? No.

1699. Would they be an advantage? I think they had a board at one time, but it was abandoned. I think it would be an advantage to have a visiting board.

MR. BENJAMIN ARDLEY TRAGITT *called in and examined.*

1700. *By the Chairman.*—What position do you occupy? House Steward and Storekeeper at the Launceston Hospital.

1701. As house steward do you conduct any correspondence? No. My duties are to keep the hospital supplied with all stores, provisions, and medical comforts, and collect the fees.

1702. In your opinion do you think large supplies should be stored at the hospital for six months, or should they be supplied as required locally? I think it would be better to get them locally, but in some instances the large quantities required are against that.

1703. Are there any complaints about the food? Occasionally there has been, but at present every thing is very good.

1704. Where do you keep the milk? It is kept in the vacant wards, and issued every morning.

1705. Have you a dairy? No.

1706. Do you collect the fees from paying patients? Yes, and keep the books.

1707. Do you keep a book for entering the rations and comforts issued? Yes. Nothing is issued without going through my hands.

1708. *By Dr. Huston.*—Do you get a commission on the fees collected? Yes, 5 per cent.

1709. What amount do you collect yearly? Last year it was £1043 for paying patients.

1710. Are the vegetables and bread supplied by contract? The vegetables are not, except potatoes.

1711. Are the other vegetables delivered daily? No; two or three times a week.

MR. GEORGE THOMAS COLLINS *called in and examined.*

1712. *By the Chairman.*—What position do you occupy in connection with the Launceston Hospital? Chairman of the Board of Management.

1713. Do you often visit the hospital? Frequently.

1714. Do things work smoothly with the Board and honorary Officers? Since the alteration in the management and arrangement of the staff. Since the appointment of the surgeon superintendent and consulting surgeons everything has worked with complete satisfaction.

1715. Are the patients satisfied with the supplies of food, bedding, &c.? Yes. I believe there are no serious complaints, and if any difficulty occurs it is remedied on application. During the last two years it has been much better, and the whole system has been much improved within the last few years.

1716. With regard to the requisitions for stores, in your opinion would it be better to get them supplied locally as you require them? Yes, except drugs, which are much better supplied by the Government direct from the manufacturers. The surgeon-superintendent, however, has that portion more under his immediate direction than I have.

1717. Do you experience any difficulty in getting repairs effected? A considerable amount of difficulty. We have to requisition to get a broken window repaired. The Board have no power to expend any money. We have £20 voted annually for ordinary expenses, but that is not to go towards repairs, except to do anything to prevent damage occurring to the building, such as repairing gas or water pipes. It would be a very great advantage if the chairman had power and authority to get necessary works done, and report the same to the Public Works Department; but that cannot be done until the management is altered. We are simply a Board of Advice, and until our constitution is altered cannot be entrusted with money expenditure.

1718. Would it be better to give you more power? I have expressed that opinion over and over again. I hope that ultimately the Government will vote a sum of money leaving the Institution to be otherwise supported by the public; in fact, have the Hospital as they are elsewhere—not a Government institution, but assisted by the Government.

1719. Would it not be better to have the duties of the servants and attendants defined? Yes, much better; and that will be done when the rules are revised. Practically it is so now.

1720. Would it not be better to have the rules of your committee amended? We find them to work fairly well, but they are to be amended and revised immediately.

1721. Do the committees conduct business without a quorum? I do not know that they have done actual business without a quorum, but I am not present at the visiting committee's meetings except on special occasions.

1722. Can you suggest in any way how the expenditure can be reduced? That would be difficult. I do not think it would be practicable to reduce it; the difficulty will be to keep the expenditure down to the present minimum.

1723. Are the patients well attended to? I believe so, thoroughly. With one exception, the patients have been thankful.

1724. Are there any immediate wants at the Institution? There should be an alteration of the nurses' home. A building is required to keep the male servants out of the Hospital except when on actual duty. At present the want of sleeping accommodation compels the men servants to sleep in the hospital, and as the nurses have to be on night duty, I think it highly undesirable to have men sleeping on the premises. The Government have sanctioned the building of a room in the yard, which will enable this reform to be carried out; and I hope we will then be able to treat a few patients at a higher scale of fees in private wards.

1725. Do *delirium tremens* patients interfere with the harmonious working of the Hospital? Yes. I would regard them as lunatics, and have them treated in a separate building. I do not think they should be sent to gaol. They should be treated at the Hospital, where special accommodation should be provided for them.

1726. Have donations been given to the Hospital? Yes.

1727. What is done with them? The amounts are vested in trustees; and the interest was expended at the discretion of the Board until the Chief Secretary prohibited our doing so without the sanction of the Auditor. The money is now held by us awaiting legislation on the subject.

1728. Do you think it should be kept apart from the Government funds? I think so. The Board should have full power to expend the money at its own discretion, but the accounts should be audited by the Government.

1729. How would you expend the money? We constantly find it necessary to do things for which the Government would not care to pay. For instance, at Christmas we like the patients to see that Christmas is not shut out from the Hospital, and we also provide a Christmas tree for the children, or to assist discharged patients to get to where they can find work. It is very necessary at times that the nurses should have a week's holiday to prevent their breaking down from constant hard work, and here we might well assist. The money should all be expended entirely for the benefit of the Hospital.

1730. What became of the £40 collected from the Chinese? That was a gift given on the special stipulation that the Government should not get it, or have any control over it.

1731. Are Chinese treated without their paying? Yes. Some pay, the majority do not.

1732. Then, should not that £40 have gone towards their maintenance? We had no power to do so when it was given as a gift with special conditions.

1733. *By Mr. Dobbie.*—What was the alteration in the management to which you alluded? The appointment of honorary consulting surgeons in the place of honorary medical officers; also the appointment of an assistant house surgeon to have beds independent of those under the care of the Surgeon-Superintendent, but under his supervision.

1734. Do you think the present system an improvement on the old one? Decidedly, so far as Launceston is concerned—there is no comparison between the two. The present system works far better than the other.

1735. Would it be advisable to give the honorary consulting surgeons further power? Undoubtedly it would, so far as Launceston is concerned, and I am borne out in my opinion by many medical men in Launceston, that they should have the right to treat their own patients in private wards only.

1736. Would you approve of the introduction of a modified scheme between the present systems at Hobart and Launceston? Only to the extent that private wards might be provided, and patients could then be allowed to have their own medical men to attend them. In order to obtain efficiency, I think you must give a doctor the *kudos* and responsibility of the beds under his charge. For instance—suppose Dr. Thompson had a case of great interest, and it was taken from him by an honorary medical officer, who treats it, he may then be called away to the country for a day or a week, and during that time Dr. Thompson resumes charge. A change may occur; but Dr. Thompson would not like to alter the other doctor's treatment, and when the latter returns it might be too late. It would mean divided authority and responsibility.

1737. Would you approve of the suggested change? I think the existing system is infinitely better. If private wards were established where a person with means could take a ward and have his own medical attendant by paying for him, there could be no objection.

1738. Do you think it practicable to have an institution supported partly by the Government and partly by the public? I think so.

1739. What about the building? That would still be vested in the Government, who would vote, say, two-thirds of the amount required for maintenance of the Institution, the public subscribing the other third, or the Government subsidy might even be reduced to half. I think such a system would give the public an interest in the Hospital, with a very satisfactory result.

1740. In that case, you would propose that the Board should have the entire management? Undoubtedly; but being responsible to Government audit.

1741. In such event, how would you propose to constitute the management? By a Board.

1742. A nominative or elective Board? I do not see how you could alter the existing system; but I would give the public who subscribed power to nominate a certain number of members to the Board in proportion to the sum subscribed.

1743. Do you think all our hospitals should be conducted on those lines? Undoubtedly. If possible, one-third at least of the maintenance should be subscribed in the immediate neighbourhood to support the Hospital; in return, giving the subscribers a voice in its management.

1744. *By Mr. Lewis.*—What are the duties of the Visiting Committee? They have general supervision of the whole of the internal management of the hospital.

1745. Do they visit the Hospital weekly? About once a fortnight as a body, but individually they visit it frequently. As a Committee for the purpose of dealing with Hospital matters, they visit once a fortnight.

1746. Have the Board any money under their control besides the private donations? None whatever.

1747. Are the salaries of the officials paid directly by the Government? They are paid through me. I am the actual head of the department by being Chairman, and have supreme control nominally.

1748. How are the fees collected? They are collected through me as Chairman. The fees are paid to the Secretary, through the appointed collector, the House Steward, who pays them in to the banking account of the Fee fund. Monthly an account is made out, vouchers checked, and a cheque for the amount is forwarded to the Treasurer.

1749. *By Dr. Huston.*—Are the donations and subscriptions received applied for the actual maintenance of the patients? No, simply for extras. We have £1000 to our credit, which was given us by the late Mr. Henry Reed, and other small sums.

TUESDAY, MARCH 9, 1888.

MR. FREDERICK STANFIELD *called in and examined.*

1750. *By the Chairman.*—What position do you occupy with regard to the Girls' Industrial School? Secretary, and one of the Governors.

1751. How are the children admitted? In the first instance application is made to the Governors by a parent of a child, and they make enquiries into the case. If they are willing to receive the child they give a memorandum to the presiding Magistrates at the Police Office to the effect that they will receive a certain child on certain conditions. The conditions generally are that 5s. per week for the child will be secured to the Governors during the time the child remains in the Institution.

1752. By whom is the 5s. paid? That is for the Magistrates to decide. In some cases the parents have to pay the full amount, in other the parents pay 2s. 6d. and the Government 2s. 6d., and sometimes, where they are satisfied that the parent is unable to pay anything, then the Magistrates recommend that the Government pay the 5s.

1753. What is the maximum amount you receive? 5s.

1754. Are children sent to the School after receiving sentence? In most cases they are destitute or neglected children—not criminal; but in some rare cases they are children who have been brought up at the Police Court charged with petty offences. Before such cases are dealt with the Governors are communicated with to ascertain if we will receive them. They are not actually sentenced.

1755. Is it optional with the Governors to receive them? Yes, we have the option of refusing them, and I think we have not had a single child who has received a sentence. During the eleven years the School has been established we have only received five children who had been charged with petty theft, and they were not sentenced. All the others are destitute children.

1756. What effect has your receiving children charged with theft had on the conduct of the Institution? Our experience is that children charged with petty theft have not proved injurious to the morals of the children generally. They are not necessarily criminal. We have much more fear of taking in children who have been immoral in their practices.

1757. Is due care taken to prevent children of immoral practices being admitted? The greatest care is practised in that respect. Sometimes, in our desire to save a girl from wrong courses, we admit one who has not actually fallen into immoral practices, although subject to very immoral and objectionable influences.

1758. If you had more accommodation could you increase the usefulness of your Institution? Yes; there are now, I suppose, fully half-a-dozen cases under my notice, most of them urgent, which we have been obliged to refuse admission for want of accommodation.

1759. Do you consider the School now overcrowded? I do not think the children suffer in the least degree from want of room, although the number of beds is large in the large dormitory, but the ventilation is first class.

1760. Have you a ladies' committee? Yes; they exercise general supervision over the Institution.

1761. *By Dr. Huston.*—Have you any children who have been ordered by the Magistrates to be detained for a specific period? In almost every instance they are ordered to be kept for a specific period. That is our authority for keeping them, and we exercise that authority if a girl should absent herself or run away from school.

1762. For what period or to what age are they detained? Up to the age of 16 years. We generally give the Magistrates to understand that we wish to detain the girls, if necessary, till they are 15. If we find them fit to go out at an earlier age we act accordingly, but it gives us a much better chance to deal with them successfully if power is given to us to exercise our authority till they are 16, especially where the girls are apprenticed. Under the Act we have power to apprentice them for three or four years after they leave the School.

1763. Do you exercise your authority during their apprenticeship? Yes; they are under our charge until they reach the age of 18 years, and we have the same authority over them.

1764. Are not 19 beds too many for a room like your dormitory? It is a very large room, and special provision for ventilation is made by means of an air shaft; there are also two fireplaces, and if necessary the windows are kept open; the air circulates very freely.

1765. *By Mr. Lewis.*—What is done with children who are charged at the Police Court with crime, and actually sentenced? I do not know.

1766. Have you refused to receive such cases? Such cases are very rare. We have been anxious to save girls from imprisonment. There may have been a few isolated cases of girls being sentenced.

1767. What would become of them then? They would be sent to gaol.

1768. Were they not sent to the training school for girls at Hobart? I am not in a position to say.

1769. Would it be advisable to have a training school in Launceston for girls who were sentenced? I think it would be a very great advantage. The number of cases would be limited, but we have found cases that require positive restraint of law, and which should not be admitted to our school on account of the immoral surroundings of the girls sentenced. In some cases the Magistrates decline to sentence young girls to gaol.

1770. What is done with them? They are let go.

1771. Practically they are turned out to continue their practices? I think so.

1772. What amount of subsidy do you receive from the Government? In 1886 we received £265 7s. 6d.

1773. On what terms do you receive that amount? It is made up entirely from the sums authorised by the magistrates for the maintenance of the children. We receive no subsidy.

1774. *By Mr. Dobbie.*—How many cases would there be in a year of girls who would be sent to a training school if you had one in Launceston? I do not think the number of girls would be large.

1775. Would there be a sufficient number to warrant the establishment of such a school? I really do not think so.

1776. Should not young girls who are now either sent to gaol or let go, when known to be guilty, be sent to the school already provided for such girls at Hobart? I most certainly can see no reason why they should not be sent to Hobart. It would be a most desirable thing, and they should certainly be sent to Hobart.

1777. Would you make any distinction between Protestant and Roman Catholic children being admitted to such a school? None whatever, provided that ministers of all religions should have access to the school for religious instruction.

1778. *By Dr. Huston.*—Have you Roman Catholic children at your school? No; ours is a private institution similar to the Girls' Industrial and St. Luke's Schools at Hobart.

1779. *By the Chairman.*—In your opinion is the management satisfactory? I am thoroughly familiar with the working of the school, and am there sometimes two or three times a week. I am a sort of executive officer for the Governors, and know everything that transpires in the place. In my opinion the officers we now have are eminently fitted for their work, and are conducting the institution to the utmost satisfaction.

1780. If you had a direct subsidy in addition to the maintenance fees now received, are you of opinion from personal knowledge that the usefulness of the institution would be extended? I feel persuaded that it would result in very great advantage to the town and the colony. We now have a debt of £1450 on the premises, having expended about £3000, the Government giving £500 towards the building fund. We have urged the Government to vote £1000 towards clearing away the debt, conditionally on our raising the balance, £500, by private subscription. Then, again, the question of increased accommodation crops up. We feel that the work is really a national work, although under the management of private individuals. We act on the principle that prevention is better than cure, and that it is infinitely better and cheaper for the Government to assist us in saving destitute girls rather than see them drift into our gaols and to ruin. We are very careful in the way of expenses, but unless we receive a subsidy from the Government I do not see how we can keep clear of debt. Our receipts from private subscriptions are no larger now than we have 33 children than when we had but half that number.

1781. What would you recommend? I would recommend that the fees be raised from 5s. to 6s. per week, making it the same as paid for boarded-out children. That would make a sensible difference to our receipts.

1782. *By Mr. Lewis.*—Is the education of your school up to the standard of the State schools? Not nearly so high. I think it would be a very great advantage if we could send the younger children to the State school. They are thoroughly under control, and no difficulty would be experienced with them. If they were sent only half the day it would relieve the matron of a great tax on her time, and be better for the children.

1783. Is your actual revenue now equal to the expenditure? No, we are going back year after year in consequence of our numbers increasing, with a necessarily additional cost without a corresponding increase in our subscriptions.

1784. *By Dr. Huston.*—Is there anything to prevent the young children being sent to the State school? I am not aware that we have power to send them, or if the master would take them.

1785. Have you made application to the Board of Advice for permission to do so? No.

1786. Have you any difficulty in collecting fees chargeable to parents for maintenance of their children? Yes, very great difficulty, and we lose considerably thereby.

1787. Have you not power to recover them? I am not aware if there is provision in existing Acts to enable us to recover fees which are ordered by the Magistrate to be paid. At any rate we have no one to collect them or undertake the matter.

1788. Could the usefulness of the institution be increased if you had more accommodation? Yes, considerably.

1789. Arising out of this want of increased accommodation, are there any cases you have had to refuse? Yes, five or six pressing cases during the past few weeks. We also need extra sleeping apartments to enable the matron to carry out a more effective discipline, as at present we cannot isolate girls if found to be necessary.

MISS BAIRD called in and examined.

1790. *By the Chairman.*—What position do you occupy? Matron of the Launceston Girls' Industrial School.

1791. Would it relieve you if the younger children were sent to the State school? Yes, very much indeed.

1792. Would it be beneficial for the children? Yes, up to the age of 12 years, or, in some cases, to 14.

1793. Have you found that the girls who were charged at the Police Court with petty theft and then sent to your school had an injurious effect on the institution? Yes, in one or two cases.

1794. How many such cases had you? Five or six.

1795. Have you any means of classification? No. We have now only one, and she is of such tender age that she could not possibly contaminate the others.

1796. As a rule, would it be better for the school if such cases were not admitted? I would not say, Shut out the little ones; it seems a shame to send them to a reformatory with bad girls of 16 or 17 years of age, but the school would be better without some of the elder ones. One of them was so troublesome that I had to appeal to the Governors to remove her.

1797. *By Mr. Gill.*—How many children are there in the school? We now have 33.

1798. How many of them have been sent by the Police Magistrate? Two.

1799. Are any of them fit for hiring out? One went out yesterday, and one will go out next month.

1800. Have you sufficient accommodation? There is enough room downstairs, but we have not sufficient sleeping accommodation.

TUESDAY, MARCH 23, 1888.

GENERAL HOSPITAL, HOBART.

DR. E. L. CROWTHER, called in and examined.

1801. *By the Chairman.*—What position do you occupy in regard to the Hobart Hospital? I have nothing to do with it now, but I was an honorary medical officer for about ten years.

1802. In your opinion is the Hospital conducted properly? I think that recent actions and occurrences show the necessity for some change in the arrangement and management.

1803. Will you instance any such action or occurrence? The dismissal of Mrs. Wilson, *ex* lady superintendent, on trial at which evidence was not taken on oath, and which witnesses refused to sign; Parliament subsequently having to instruct the Chief Secretary to furnish Mrs. Wilson with the certificate which was refused her by the Board: the action of Parliament being taken to enable her to earn a living, of which the action of the Board had deprived her.

1804. Will you mention in detail any existing arrangement that in your opinion requires alteration? I think that those who pay for the maintenance of the hospital—the public—should have a voice in the management of the institution and constitution of the Board. I mean that a portion of the Board should be elected by the ratepayers. By so doing the Board would be amenable to public opinion, of which it is now entirely independent. I would divide the colony into hospital districts—south, north, and midland, &c.—and thus form constituencies for the election of certain portions of the Board of Management for the hospitals in those districts.

1805. Do you think that the present Board of the Hobart Hospital have carried out their duties properly? I think the case of Mrs. Wilson proves that they have not.

1806. Is there any room for complaint in regard to the medical treatment of patients? I think since the present House-Surgeon has been in charge some very serious cases have occurred which require investigation. I allude to M'Donald, who was left with a catheter in his bladder, he having to remove it himself, and having to go to a private medical man to have his water drawn off; to Chester, who was declared to be not a lunatic, and yet was soon afterwards sent to the Lunatic Asylum; to Mrs. Evans, and

the treatment of her child; to Free's case, an instrument being broken in his bladder and left there; to Callan, who was allowed to jump out of the window, and died shortly afterwards; to Lloyd, who was permitted to run out of the Hospital whilst delirious from typhoid fever; to Moody, who had to sleep on the floor for weeks, thus causing severe rheumatism; to Lonsdale, who was for a day and a half in the cells without having her wounds dressed; and others.

1807. Have these cases occurred whilst Dr. Parkinson was in charge of the Hospital? I believe so.

1808. Have you visited the Hospital lately? I have not visited the Hospital professionally lately.

1809. Have you visited the Hospital professionally since the appointment of the present Lady Superintendent? No.

1810. What is your opinion of the general arrangements and management of the Hospital, of the quality of food, &c. supplied? There is no doubt some improvement is required in regard to the food and its cooking.

1811. Are the kitchen arrangements sufficient? They were not sufficient when I was an honorary medical officer, and I do not think they have been altered since.

1812. Do you approve of medical men having separate wards? There are no private wards, and the absence thereof takes away a large amount of public interest. A patient who has been attended by a medical man outside should be allowed to be attended by the same medical man when sent into the Hospital.

1813. Do you think the House Surgeon should be allowed to have private beds of his own? Most certainly not. One of the weak spots in the Hospital management, in my time, was that the beds of some of the medical officers were left too much to the House-Surgeon.

1814. Whilst you were one of the honorary medical staff, were there any strained relations between the staff? No, we worked most amicably together for ten years. We never had an angry word until Mrs. Wilson's case cropped up.

1815. Do you think the rules and regulations for the management of the Hospital require revision? Most decidedly. The rules and regulations both require immediate and careful revision. One blot in the management of the Hospital is that the public have no power or control over the Institution for the maintenance of which they pay. And there is no way of a medical man getting a private ward for a private patient; he has no power to attend patients in the Hospital whom he has been treating outside. Medical men should have the privilege of sending bad cases into the Hospital where they could attend them in private wards.

1816. Do you think the nursing staff sufficient? The nursing staff was fairly good in my time, and mostly sufficient, except in regard to the night arrangements. There should be a man who could be called immediately at any hour of the night if occasion required.

1817. Do you think the patients have sufficient medical attendance during the night? They have quite sufficient attendance when the medical men are summoned. I am quite sure the doctors attend when called, but trouble may occur before the doctors get to the patients.

1818. In your time did the honorary medical staff attend regularly? Most regularly, with the exception of Dr. Smart, whose wards were left too much to the House Surgeon. The House Surgeon always attended patients when called on, and I am sure the staff worked well.

1819. Do you think the present number of members of the Hospital Board too large? Yes, I certainly do.

1820. What number and constitution would you recommend? I think three members elected by the hospital district and four appointed by the Government would be quite sufficient.

1821. Would you approve of the system of the public subscribing a certain amount to the Hospital, and the subscribers electing a portion of the Board? It would be an excellent arrangement, but I do not think the election should be confined to direct subscribers, for the ratepayers, as a whole, have to pay towards the maintenance of the Hospital. The public should elect three members and the Government appoint four, including a chairman. A Board so constituted would command the confidence of the public, and still allow the Government to retain the balance of power in the management.

1822. So far as you know, do the Hospital arrangements run smoothly? Yes; but the honorary medical staff is weak at present, but is being filled up again to its proper strength.

1823. *By Mr. Dobbie.*—In regard to the constitution of the Board recommended by you, would you prefer election by the ratepayers or by subscribers to the Hospital only? I would prefer it being in the hands of the ratepayers generally, for thereby you would create a more general interest in the Hospital, which is undoubtedly a public institution. The poorer people in the country districts use the Hospital largely; they are directly interested in its management, and whilst unable to subscribe directly to its funds, should have a voice in the election of a portion of the Board. Certainly subscribers should have the privilege of voting, and, I think, a combination of the two would be quite possible. Give those who pay an extra vote.

1824. Do you think the power exercised by the present Board would be sufficient for a Board constituted as you recommend? The present Board can really do anything, but their actions are subject to the sanction of the Chief Secretary. If the Board were partially elected by the ratepayers and subscribers, of course they would require different power.

1825. If the Board were constituted as you suggest, would it be better to give them absolute control of the institution? Most decidedly it would. If the public had a voice in the election of the Board they should have supreme control, always provided that one-third of the members retire each two or three years and are not eligible for re-election for five years.

1826. How long has the present House Surgeon been in charge of the hospital? About two and a-half years, I think.

1827. You instanced a number of cases which indicated a want of management in connection with the hospital—to whom do you attribute the blame attachable, in your opinion, of those cases? I would not attempt to say who was to blame in regard to those cases. If you take on oath the evidence of witnesses, and indemnify them for the result of information given, you will soon find out.

1828. Have all, or any of these cases occurred within your own knowledge? M'Donald woke me up at night to draw off his water after leaving the hospital, after taking himself an instrument out of his urethra. Chester's is a public question, he having been declared perfectly sane at the hospital, and then almost immediately sent to the Lunatic Asylum. Mrs. Evans' case is the well known "dirty linen case." Callan, whilst suffering from typhoid fever, as proved at the inquest, walked out of the window of his ward, which was over 20 feet from the ground, and died shortly afterwards. Lloyd, in a similar condition, was captured in the streets by the police. Lonsdale can be called as a witness to state her own experience.

1829. In your opinion these cases should not have been permitted to occur in a hospital? Certainly the majority of them should not have been permitted.

1830. Could all those cases have been prevented? In my opinion the majority of cases instanced must have been the result of muddle. There may have been extenuating circumstances in the cases of Evans and Lonsdale, as the resources of the Hospital and staff were just then very heavily strained owing to the typhoid fever epidemic; but if you take evidence on oath you can easily prove it.

1831. Are the patients in the Hobart Hospital under the charge of the honorary medical officers? Yes, entirely.

1832. What are the functions of the House Surgeon? To act in the absence of the honorary medical officers for them, and to carry out the general management of the Institution.

1833. Does he treat the patients? He has no right to treat them except in cases of emergency.

1834. *By Dr. Huston.*—Did you know of any strained relations in connection with the management of the Institution during your ten years' experience, except that in regard to Mrs. Wilson? No, with that single exception everything worked most harmoniously. The first trouble was over the suspension of Sister Turnbull. That was after I had been on the staff for seven and a half years, and during which time no difficulty had occurred. With an administrative servant like Dr. Holden—than whom a better never had charge of a hospital—the trouble could not have occurred.

1835. Do you attribute the commencement of strained relations between the Board to the action taken in regard to Mrs. Wilson? There is no doubt of it. The first trouble was owing to Dr. Smart's brother having sent out the Scotch sisters, and, whether right or wrong, Dr. Smart thought it his bounden duty to support those sisters; and to the general carelessness and want of regularity of Dr. Parkinson, and the partial manner in which he acted in the matter in question.

1836. Do you give the management credit for acting conscientiously in Mrs. Wilson's case? After the Government and Parliament having to take action in the matter, and to do an act of justice which the Board refused to do, I do not see how they can be credited with having acted conscientiously or honestly. Mrs. Wilson I knew very little of, but I could not stand by and see her as a woman injured unjustly.

1837. Can you give in detail the objections to the food supplied in the Hospital, and its cooking? There is plenty of good food, but the system of cooking requires to be more assimilated to the cooking in a private house. For instance, if the chops are not stewed in fat they are cooked brown. There should be more detailed supervision and less wholesale cooking. A chop tastefully cooked will often tempt a patient's appetite, when one of a number cooked for a crowd only produces loathing.

1838. Whose duty is it to see to that? I think the kitchen arrangements are principally to blame,—in fact very much so.

1839. Who orders the food? The House Surgeon, as a rule, but the honorary officer, when he thinks it necessary, changes the diet.

1840. How are the extras obtained? Whenever an honorary officer thinks an extra is required he orders it, and it is immediately procured. During my experience I rarely had to speak twice to get any food I ordered. The diet had improved very much latterly, but there was still room for improvement.

1841. Had you ever any difficulty in obtaining stimulants? Not the slightest; everything necessary was obtained, even champagne, without trouble or difficulty.

1842. Do you think stimulants were used lavishly? I think the only weak point about that is want of supervision. I think the consumption of stimulants and extras generally would be very much decreased if there were more detailed daily supervision of the diet and extras.

1843. In regard to the cases in the Hospital instanced by you in regard to the management, did they all come under your notice? I only stated cases that came under my personal notice, and most of whom were my own patients. I did not seek cases.

1844. Do you know of any other cases? I could get you others if I looked for them, but I did not seek out cases.

1845. *By Mr. Brown.*—How long is it since you took an active part in the affairs of the institution? I have not taken an active part in it since I left the Board, early in 1887.

1846. Has it come to your knowledge since you left the Board that the grievances complained of still exist? Yes; and in answer I may say that an inquest was held at the Huon last Wednesday on the body of a Mrs. Schnell, who had died after leaving the Hospital. Previous to her death she told her husband that she left the institution and walked home because she could only get fish diet, and that she could not eat.

1847. Can you instance any other case? I can say generally that the public are dissatisfied with the general management.

1848. Why are they dissatisfied? Because they have no voice in the management or control; this amongst other reasons.

1849. Is it only because they have no voice in the management that these complaints are made by the public? That is partly the reason, and also the absolute certainty that no redress will be granted if a case is brought forward. The public have no confidence in bringing forward a case that it will be tried fairly and impartially.

1850. *By Mr. Lewis.*—Do you approve of the present system obtaining in the Hobart Hospital, of the House Surgeon not being allowed to treat patients? and do you think that the continuance of such system will militate against a good man remaining in charge of the institution? The House Surgeon having or not having patients to treat separately will not make the slightest difference with regard to the hospital arrangements. You only pay a salary for which you can obtain the services of a young man, and unless you increase it to £1000 you will not get a first-class man to remain; but if you give your House Surgeon beds you will very seriously take away the interest now exhibited by your honorary staff, and it will be the same as at Launceston. At the Launceston Hospital Dr. Thompson “runs the show;” at Hobart the honorary medical men do the work, assisted by the House Surgeon; and ours is the system used nearly all over the world. In Dr. Thompson the Launceston Hospital has a first-class man—one in a thousand—who takes a pleasure and interest in his hospital, and under him I believe the system there adopted works well, but I am convinced it will fail under 19 men out of 20 you get. If Dr. Thompson left to-morrow you would find that his successor would not succeed under their system. It is a great advantage to have your House Surgeon changing. I certainly would not keep him longer than four years, however good he might be. The profession is only in its infancy, and the march of science and knowledge is going on every day. Young men fresh from the London and other large hospitals bring with them new ideas that were not thought of in former years by the profession, and new and improved instruments are being introduced every day, which in the ordinary course of events our medical men would not see for years. Young doctors see all such instruments, and learn their value and use, and such an institution as the Hobart Hospital could and should acquire them, or at least those most useful and necessary.

1851. Would you elect the honorary medical men? The public certainly should elect some of them, and increase number to six; but this they really would do when the Board is elected by ratepayers.—See 1825.

1852. Would they be included among the seven whom you think should constitute the Board? I would not have any medical men on the Board at all. In England—and I think we cannot have a better guide—the medical men are not on the Board of Management. I believe the Hospital would be far better worked if the honorary medical officers had a right to attend meetings of the Board and express their opinions on various subjects, but they should not have a vote.

1853. Has the institution any funds for sending poor patients from the country home after leaving the Hospital? I started a Samaritan Fund, which, if properly administered, will enable poor patients to receive some assistance after being discharged.

1854. Who administers the fund? I think it is left to the Finance Committee and House Surgeon.

1855. Has the Board power to order the removal of the old and disused buildings and rubbish now in the back yard? Any reasonable request made by the Board is always attended to. There might be a little delay sometimes, but they always get done what they require if they persist. They could get the rubbish removed if they desired it.

1856. If the Chief Secretary refused, could the Board get it done? Certainly not. The Board do everything, subject to the Chief Secretary's approval; but during my ten years' experience I never knew any reasonable request to be refused.

1857. What would be the cost of electing a portion of the Board, as recommended by you, by hospital districts? There would be five hospital districts, and I think £100 would more than cover the cost.

1858. Do you think the ratepayers should elect the honorary medical officers? Yes; but the subscribers to the Institution should have a greater voice than the general public.

1859. Are you still of opinion that Callan's case was such a serious reflection on the management as to amount to murder? You can call it manslaughter, if you prefer that term; but I think a man in his condition should not be left without someone to control his actions. He had no right to be in an upstairs ward at all, and ought to have been properly controlled. The Hospital authorities are responsible for his death.

1860. Can you suggest any way by which the expenses of the Hospital can be reduced? I think a considerable saving could be effected if the diet were regulated more closely, that is, by cutting off the extras immediately they cease to be required, and if public interest were more largely obtained, the cost would be considerably reduced. You want accommodation for the better class of patients, and who are quite willing to pay extra fees. Outside medical men should be able to send their patients, if necessary, into the Hospital and attend them. These patients would willingly pay the extra cost for nursing and attention, and especially for the use of the Institution instruments.

1861. Is there not now accommodation for such cases? Very little, if any; and I think the typhoid epidemic has demanded the greater part of the available accommodation that could be used for such purposes.

1862. Do you mean that every medical man in Southern Tasmania should have the right to send his patients into the hospital and attend them in there? Yes, undoubtedly; but only a few would avail themselves of the privilege.

1863. What would be the duties of the honorary medical officers in regard to such cases? They would have nothing to do with any but their own cases. You would be merely dealing with the Hobart patients; therefore the number would be strictly limited, for only a few doctors would send their patients into the hospital.

1864. Would it not be availed of generally? No; but it would give the public the right to have their own medical man attending them, with the advantage of consultation of the staff in any surgical or critical case requiring it.

1865 Would increased accommodation be required? The present arrangements for such patients are a disgrace to an institution like ours. There is at present a patient in a public ward, although paying largely, and who is quite willing to pay any reasonable expense for a private ward. There should be proper accommodation for such cases, and the receipts from such patients would not only pay for the additional cost, but assist largely in reducing the cost of the hospital. I have a rich patient, who will go into the hospital tomorrow if I am allowed to attend on him, at this very time.

1866. *By Mr. Gill.*—Do you know of any late case that would reflect on the present management? I have lately refused to listen to any cases of complaint. I have had enough of it. Let some one else have a turn.

1867. Do you know of Kinchelsa's case? I heard something about it, but had not time to go into it. I know it was a cruel one.

1868. Do you think a homeopathic ward should be established in connection with the hospital? I certainly think that there should be a homeopathic ward, because a portion of those who pay to maintain the hospital demand it, and I think they have a right to be considered the same as others, but I can appreciate the difficulty that will arise in dispensing medicines, there being only one homeopathic dispensary in Hobart.

1869. Do you think there should be a ward for magnetic treatment? I think, wherever practicable, provision should be made for carrying out every modern idea of treatment.

1870. Do you think that if you have a case outside, and the patient is sent into the Hospital, that you should have entire charge of that patient's treatment? Yes. I have now to give up every one of my patients as soon as they come into the Hospital, whether it be a case of surgical treatment or otherwise.

1871. Is it usual for older nurses to teach the younger? One of the stated reasons for Mrs. Wilson's dismissal from the position of Lady Superintendent was that she did not teach her nursing staff; but at this moment there is no better system of teaching than then. Another given reason was that the food supplied by her to the Nurses' Home was not what it should be; but, as a matter of fact, the nurses do not now receive as great a variety of provisions, although the cost to them is greater.

1872. Do you think if a change were made in the Board's constitution as recommended by you, that the public would have more confidence and more favour in the Institution? I believe if the public had a voice in the election of the Board, and could go into the Hospital to be treated by their own medical men, that the Institution would gain very much in popularity, and the receipts would largely increase.

1873. Are you in a position to know that the Hospital is not popular? For some time it has been anything but popular.

1874. *By Mr. Dobbie.*—Do you think it a good plan to keep the drugs in store as at present? It would very much increase the expenses if you procured them locally. I do not think you can have a better plan than to buy the bulk of the drugs required direct from London, and store them on your premises.

1875. In purchasing the drugs in London do you obtain a better quality of goods? Most decidedly you do, by dealing with a first-class house; but I think the requisition should be quarterly, and limited to non-destructible drugs.

1876. *By Dr. Huston.*—Is there a medical school at the Hospital? Yes.

1877. How is it conducted? I think it is conducted with the greatest benefit to the students. The Assistant House Surgeon has a small sum voted to him for the purpose of teaching the students, and it has been carried out with very excellent results to the students. There are no students now, three having just left for England. I think with a little management the class could be so popularised that students from the other Colonies would come here to study anatomy, to the great advantage of themselves and the institution.

1878. What number of students would you fix as the maximum? I think each surgeon should have two or three; the maximum should be about ten, and £200 or £300 per year might be made out of the students who would come here to study anatomy.

1879. *By the Chairman.*—In view of future enlargement of the institution, are you of opinion that the block at the corner of Campbell and Liverpool streets should be at once secured by the Government? Most decidedly I do. The Nurses' Home should be built there, and the present Home could be utilised for other purposes. The land will never be cheaper, and is absolutely necessary to carry out a proper scheme of accommodating patients.

1880. Do you think the present accommodation insufficient, or do you mean to provide for a wealthier class of patients? I certainly think the present accommodation is insufficient, and provision should be made for a higher scale of fees. For instance, a patient coming into the Institution suffering from *delirium tremens* should pay at least £1 a day if in a position to do so.

DR. THOMAS CHRISTIE SMART, *called in and examined.*

1881. *By the Chairman.*—What position did you occupy in the Hobart Hospital? I have been Chairman of the Board of Management for over ten years, and Honorary Medical Officer for twenty-seven years.

1882. In connection with the management of the Institution, in regard to the medical officers, has it been satisfactory of late? Most satisfactory; nothing could have been more so.

1883. Have not some charges been made against the Institution? Yes, I am aware that there have.

1884. Has there been any ground of complaint for neglect of patients or misconduct generally since the appointment of the present House Surgeon? I cannot recall a single instance of neglect or wrong treatment, or anything approaching misconduct, with regard to the employees during that time.

1885. Could such have occurred without your knowledge? Having been Chairman of the Board during that time, nothing of the kind could have occurred without my knowledge. It could not have escaped my notice.

1886. How does the House Surgeon discharge his duties? Very well indeed. I regard him as a thoroughly well qualified man. He makes no fuss or display, but I have every reason to believe he discharges his duties in a careful and efficient manner.

1887. Did the Board work smoothly in regard to the general conduct of the Hospital? No body of men could have worked more harmoniously. I have been over ten years Chairman, and have never seen or heard of a body of men working more earnestly together for the welfare of an Institution. There has been no unpleasantness amongst us of late.

1888. Do you think any improvement could be effected in the constitution of the Hospital? I do not see how it could be improved.

1889. Would you approve of any elective system being introduced? As now appointed the Board is respectable, and will always be so; but if you make the Board elective it will become corrupt, and members will be elected through all kinds of public feeling and by bribery and corruption. The Board is composed of men who are respectable and worthy of public confidence.

1890. Would it be well to have the Hospital partially supported by subscribers who would have votes for members of the Board? The moment you introduce the system of subscriptions you introduce trouble and difficulty, for every subscriber would, according to the subscription paid, have an interest in a certain number of beds and a voice in the management.

1891. Do you think it would be an improvement on your present system? I do not think it would be an improvement to the Hospital; on the contrary, the management of the Hospital would become degenerated.

1892. Would you approve of honorary medical officers having wards? We have discussed that question fully. It seemed to be the best plan to have a ward or one and a half ward to each doctor, so that any patient coming in would be under the doctor whose week it was, unless the patient expressed a wish to go under the treatment of any particular medical man. During the fever epidemic we have been compelled to mix the patients, but each doctor had a different coloured card over the bed so that he could pick out his patients immediately.

1893. Would it be possible for the House Surgeon to have patients under his own immediate control? It would not work at all. You would have one paid officer and three or four honorary officers all holding the same position. So long as there is a House Surgeon he must be ready at all times to assist in the general working of the Hospital. It would never do to allow him to have patients of his own.

1894. Do you think it would be well for the House Surgeon to be changed occasionally? No. Many years ago it was thought to be the best plan to get for House Surgeons young medical men who had just arrived from England, and give them charge of the Institution, where they gained experience. On several occasions on which this was done I have not the slightest hesitation in saying that the general management of the Institution was bad. There was no control over them. A medical man to take charge of the Hospital as House Surgeon should be not only a well-qualified man but he should also be a married man, who would make a home in the Institution, where he would always be found when wanted.

1895. Do you not think that patients should be made to pay more in accordance with their means? We can only charge for maintenance. We cannot charge for medical attendance.

1896. What is the maximum charge? We have not fixed a maximum charge. Where extras are required and extra nursing is necessary, and the patient can afford to pay, we have charged ten shillings a day—but that is exceptional; we generally charge about five shillings a day.

1897. Would it not be well that wealthy patients should be charged more in accordance with their ability to pay? If you adopt that system you would drive the honorary medical men out of the institution. You would simply be bringing the Hospital into competition with their private practice.

1898. Is there sufficient accommodation in the Hospital? Yes, for all present wants. When the present buildings were being constructed care was taken to provide for the future, and it was exceedingly fortunate that we did so, for I do not know what we would have done during the fever epidemic if such provision had not been made.

1899. Do you think the accommodation should be increased to allow the private practitioners to bring in their private patients and treat them in the Hospital? Certainly not; I think it would be most objectionable.

1900. Why not? Because this is not a private hospital. In London and other large cities where they have private hospitals the two institutions do not clash; but here they would clash. You would require a separate matron and a separate staff. It would be impossible to amalgamate the two systems.

1901. Do you think it advisable to have medical men on the Board of Management? Not many.

1902. How many would you approve? I think three would be sufficient. I am quite sure that if you introduce too much of the medical element into the Board you will surely have difficulty.

1903. Do you think it judicious to have any medical men on the Board? I do not think it any harm to have a certain restricted number of medical men on the Board; but their number should certainly be restricted.

1904. Would you allow medical men to have a seat on the Board without voting power? I certainly think if they have a seat on the Board at all they should have a vote.

1905. Are you of opinion that the block of land adjoining the Hospital, at the corner of Liverpool and Campbell streets, should be purchased? Most certainly; I have recommended it for the last six years. It was part of the late Government's scheme to purchase it. If that corner were purchased a proper Nurses' Home should be erected there, and the site of the present Home could be utilised for other purposes or sold. I would like to see a suitable Nurses' Home erected, and by securing that corner it would make the whole of the Hospital in one block. The present nurses' quarters are unsuitable. If this were carried out the hospital scheme would be complete, in accordance with the plans submitted to Government six or eight years ago.

1906. Should not those old buildings in the Hospital grounds be removed? The Government have been urged to remove them, and the contract for their so doing has been accepted, and the work will be done at once. It is a disgrace to the institution to allow them to stand.

1907. Are your kitchen arrangements complete? Most decidedly not; they are very incomplete. The present kitchen has been condemned, and a kitchen with modern appliances is to be built.

1908. Is the food satisfactory? Some years ago our meat was supplied at the same rate as it was supplied to the gaol, and was inferior, but we moved in the matter, and after a good deal of trouble we induced the Government to see the absolute necessity of the Hospital getting the very best food obtainable.

1909. Is the food now supplied good? It is the very best that can be got.

1910. Do you think there is a sufficient and competent staff of nurses? I believe we have now as competent and efficient a staff of nurses as can be obtained in any hospital.

1911. Do the elder nurses assist in teaching the younger? Yes, they do. Practical nursing at the bedside is of the first importance, and that is taught here as much as in any part of the world, but the theoretical part of the teaching has not been carried out very fully. It was never carried out under the late Lady Superintendent, and during last year the number of typhoid fever patients taxed the nursing staff so heavily that if any additional strain had been placed on them in the shape of attending lectures or theoretical study they would have broken down. I have conferred with the Lady Superintendent on the subject, and so soon as the fever strain is over, theoretical training will be undertaken. When Dr. Holden was House Surgeon he commenced a series of lectures, and Dr. Parkinson did the same, and would have continued them but for the outbreak of typhoid fever, which strained the resources of our nursing staff heavily.

1912. Is your store-room accommodation sufficient? It certainly should be better.

1913. Do you think the present system of requisitioning for stores every half-year is preferable to buying them locally? Yes, decidedly. For instance, you get your drugs fresh and at wholesale prices, and a contract is made with a local druggist to supply us with anything additional required.

1914. Would it be better to have general stores, such as blankets, &c., supplied in large quantities? That was always the rule, but it has been broken through a good deal lately; we get a large amount of our blankets and flannel locally.

1915. Is the brandy good? Yes, we can find no fault with it now.

1916. Is the water and food supply good? Everything supplied is of the very best quality. The contracts are all for the best descriptions obtainable. It is our own fault if we do not get everything good, and we take care that it is first-class.

1917. Do you think the accommodation for *delirium tremens* patients could be improved? Most decidedly: the present accommodation for men suffering from *delirium tremens* is indescribably bad.

1918. *By Mr. Lewis.*—What provision do you propose to make for males suffering from *delirium tremens*? Separate accommodation should be provided. It would never do to bring the males among the female patients. I propose to have a building erected between the present kitchen and Campbell-street. It is part of the plan to have a separate building for *delirium tremens* patients.

1919. Do you experience difficulty in getting small repairs executed? We have experienced great difficulty, but that has been removed to some extent. For instance, if a pane of glass were broken we have to send a requisition to the Chief Secretary, then some one comes to look at it, and by and by some one comes to repair it; often a week elapses before anything is done in the matter. I have urged that a small sum of money should be placed to our credit; we asked for £20 and £5 was given us, and this sum small as it is will allow us to do such little things as replacing broken windows or repairing pipes.

1920. Are the rules of the Institution satisfactory? I think so, but they want revising again. We have appointed a committee to revise the rules, but at present they work fairly well.

1921. When will the revised rules be published? It might be done within the next month.

1922. Do you approve of the plan by which any medical man, not connected with the hospital, could send his patients into the Institution and treat them there himself? I think such a system would completely break down any institution similar to ours. You would require an institution three times as large as ours to carry out such a system, and you would require an entirely separate staff.

1923. Do you think the powers conferred on the Board sufficiently great? I do not think we could wish for more power than we have. No reasonable request made by the Board is ever refused.

1924. How is the Samaritan Fund disposed of? It is used for the benefit of very poor patients who come from the country. Often when a patient recovers he has not the means to get a meal or a bed. The object of the Samaritan Fund is to pay the fare of poor patients back to their homes if they live in the country, or to pay for a night's lodgings and a couple of meals for very poor town patients after their discharge, so that they are not left helpless. The fund, which is a most excellent one, is now in the bank in the names of myself and another Member of the Board. It is generally distributed by the House Surgeon and Finance Committee.

1925. How do you get the money? We place money-boxes for the purpose in public places and shops, and get funds thereby. Some five years ago a gentleman came here very ill and died, leaving £50 to the Samaritan Fund, and since then the fund has accumulated, generally by donations, until it has reached about £130. The late Mr. Chas. Abbot left £500 to the Hospital to provide for the wants of the poor patients, and there is no way the Board can dispose of it to assist the really poor so well as through the Samaritan Fund.

1926. Have you any fund or means for providing entertainment or pictures for the children patients? We receive donations specially for supplying pictures and picture books for the children.

1927. Do you think the Government should provide funds for paying the fares home of country patients, and providing means of entertainment for the children? The Samaritan Fund is quite sufficient for paying the fares home of such country patients as absolutely require assistance in that way, and the children are very well provided for. We have now funds in hand which will enable us to add very largely to our library. Twelve months ago a concert was got up in the Town Hall in aid of the Hospital library, and we received £40 from the proceeds, which is still in hand.

1928. *By Mr. Dobbie.*—Do you think charity should be the one aim of the Institution? Most decidedly. The more it is made an institution for the wealthy the less it will become a hospital for the poor. The rich can provide for themselves, the poor cannot. I would never regard this Hospital in the view of making it a paying institution, but rather one to provide medical attendance and nursing for the poor.

1929. Have you sufficient accommodation for the nurses? No. The nurses now have to be separated for want of proper accommodation. It is necessary to separate the nurses engaged in the fever wards from the others, and that is done as much as possible, but great inconvenience is experienced for want of proper accommodation.

1930. Is the separation of the nurses as just alluded to a disadvantage? Certainly it is, as we are compelled to separate them.

1931. Is this separation owing to your desire to keep the fever nurses apart from the others, or because of insufficient accommodation? There is a decided want of accommodation for the nurses. At the Nurses' Home there are two little rooms, which are not fit for sleeping apartments in any sense, but three or four of the night nurses sleep there. These rooms are not what they should be.

1932. Is it desirable that a Nurses' Home should have accommodation for properly separating the fever nurses from others, and affording a proper home? Most desirable. They should most certainly all be under one control.

1933. As Chairman of the Board do you visit the Hospital every day? Very seldom a day passes without my visiting it.

1934. Could a case of malpractice or ill-treatment occur without your knowledge? I do not think so.

1935. During the time the present House Surgeon has been in charge of the Hospital has anything that can be called malpractice or ill-treatment occurred within your knowledge either on the part of the House Surgeon, Assistant House Surgeon, or Honorary Medical Officers? I have never known or heard of any such case occurring in the Hospital.

1936. With regard to Callan's case, which has been designated manslaughter—was it so? Certainly not. In the first place Callan was as deaf as he could be without absolutely losing his hearing altogether. He came into the Hospital as a typhoid fever patient, and we had reason to believe that his mind was very much gone before he took the fever. He was in a peculiar condition, for he could not be conversed with. He was placed in one of the wards with other fever patients, and for a time progressed promisingly. One day he had been restless, as fever patients often are, and when the nurse returned to the ward after necessarily leaving it for a short time, he was gone. Immediately the alarm was given, and he was at once seen walking along the yard in his shirt, as if nothing had happened. The window of the ward is about 20 feet from the ground, but there is a ledge by which a man could let himself down, and the supposition is that he had taken advantage of it. Then I had him removed to a ward on the bottom floor, and every precaution taken to prevent him endangering himself. I saw him daily for six days afterwards, and there were no signs of his having sustained injury by leaving his ward, beyond the fact of one of his feet being sprained. He became *non compos mentis*, and neither his friends nor I could make him understand anything.

1937. Was an inquest held into the cause of his death? Yes.

1938. Who performed the post mortem examination? Dr. Giblin.

1939. What was the verdict of the jury? That he died from ulceration of the bowels caused by typhoid fever.

1940. Was the fact that Callan was able to get out of the window of the ward due to any fault of the nurse in charge? Most certainly not.

1941. Was there anything in his case that would necessitate his being strapped to the bed? No; although restless, he was easily managed.

1942. With patients such as Callan, was there a sufficient nursing staff to prevent occurrences such as that? There was not a second nurse in the ward; it would be impossible to have a second nurse without abnormally increasing the staff.

1943. Were there many patients then in the Hospital? Yes; we were strained all through on account of the fever epidemic, but the nursing staff was sufficient.

1944. The case of Mrs. Schnell has been mentioned in evidence: do you know anything about it? No, nothing.

1945. *By Mr. Brown.*—What are the arrangements for night nursing? The night nurses go on duty at 9 o'clock, and are disposed of by the Lady Superintendent in such way that the duties are carried out as well as possible. The night nurses on duty in the fever wards are kept entirely separate from the other nurses. The night nurses are on duty from 9 P.M. till 6.30 A.M., when they are relieved.

1946. Should the night nurses require assistance, how can it be obtained? We have electric bells connected with the wards, by means of which the whole Hospital, including the night watchman and Lady Superintendent, can be aroused in three minutes.

1947. What disinfectants are used? Condy's fluid is used extensively for disinfecting the excreta from fever patients, also carbolic acid and sulphate of iron; chloride of lime is also used.

1948. How long is the refuse from the kitchen allowed to accumulate? I cannot say, but I think for about a week. It is never allowed to become putrid.

1949. What becomes of the fat, &c.? I think it goes to the Gaol.

1950. *By Mr. Gill.*—What would be the salary of a first-class House Surgeon? I do not think you could get a first-class man to remain for less. I have always advocated getting a good man and paying him fairly well. Certainly a first-class man could not be got permanently for the present salary.

1951. What is the present salary worth? With salary, free house, fuel, light, and no taxes, I should think about £450.

1952. If a really good man were obtained, and proper accommodation provided for paying patients, would it not prove remunerative? The system would not work. If you allowed the House Surgeon to have private patients, and thus bring him into competition with the profession, you would have no honorary medical officers. They would not have anything to do with the Hospital under such a system.

1953. Can you suggest how the present expenditure can be reduced without impairing the efficiency of the Institution? If the whole management of the Institution were entirely under one man, and he were a very careful man, he might possibly pinch and save in various little ways, and at the end of the year show a considerable reduction; but whilst every honorary medical officer has a voice in the management, and orders what he thinks necessary for his patients, the Board having no power to interfere with him or restrain him, I do not think any material reduction can be effected.

1954. Is it not the duty of the House Surgeon to see that extras supplied are not allowed to run too long? I think he always does so. I have always asked the House Surgeon to stop any extras ordered to my patients when he thinks it no longer necessary, and he always does so.

1955. Do the patients always seem satisfied with the treatment they receive? I have heard them express thanks for the treatment they received in the Hospital hundreds of times, and I have never had a complaint from my patients.

1956. Have you heard of Kinchella's case? No, I do not know what it was.

1957. He complains that he was left with his water stopped all night and half a day whilst in the Hospital? I never heard it mentioned before, and I do not think it possible.

WEDNESDAY, MARCH 28, 1888.

DR. CHARLES JOSEPH PARKINSON *called and examined.*

1958. *By the Chairman.*—What position do you occupy? House Surgeon of the Hobart Hospital.

1959. How long have you occupied that position? I was appointed on 1st December, 1885, and have now tendered my resignation.

1960. During that time how have you worked? Under a Board of Management.

1961. Have your relations with the Board always been satisfactory? Quite so.

1962. Will you state what your duties are? They are set forth in the book of rules of the Hospital. The main duties are to fulfil the duties allotted to the House Surgeon under the rules and regulations.

1963. What are your duties in regard to the honorary medical officers? To attend to the patients during their absence, to accompany them through their wards during their visits, and to carry out their instructions in regard to the treatment of patients.

1964. In cases of emergency do you act on your own responsibility? I act at my own discretion and on my own responsibility.

1965. What are your general relations with the honorary staff? Satisfactory, perfectly so.

1966. Are you aware whether they are satisfied with the manner in which your duties are carried out? I have every reason to believe they are quite satisfied.

1967. Have they always been satisfied, and have the relations always been satisfactory, so far as you know? I have never had any complaints from any of the honorary medical officers of any treatment of the patients whilst in the Hospital.

1968. Have you ever experienced difficulty through not being supported by the honorary staff? I was not supported by Dr. Crowther at times.

1969. Can you state an individual case? The case in regard to the suspension of Sister Turnbull, and the case arising out of it in which she was concerned, is a case in point.

1970. Do you consider that the relations between yourself and Dr. Crowther especially were of a strained character and unfair to yourself? After a certain period I thought so. Our relations were perfectly friendly for a certain time, but after the quarrel between the Lady Superintendent and Sister Turnbull they became strained.

1971. Will you state in what way, and under what circumstances, you felt any cause for complaint? He never did anything personally to me within the grounds of the hospital of which I could complain. I used to accompany him through his wards up to the last in the same manner as before, and received his instructions and carried them out. It was from his actions and conduct outside the Hospital in regard to myself that I considered the relations between us were strained, and certainly were changed.

1972. Do you know anything of the case of M'Donald? I do not remember the name—what was the case?

1973. It has been stated in evidence that a catheter was passed and left in his bladder without obtaining the usual relief; that he went to Dr. Crowther and had the instrument taken out, and got relief: is that so? I never heard of it before. I am certain I never left a catheter in a man, nor did I at any time allow a man to leave the Hospital with an instrument in him.

1974. Could such a thing have happened without your knowledge? It is possible that such a thing could occur with Dr. Lever without my knowledge, but I most certainly think it never occurred. Dr. Lever's evidence can be obtained.

1975. Is there any means of tracing this man's name, or the treatment he received in the Hospital? I can find out if he was an out or in-patient, and what he was treated for; we only preserve the books till the end of each year. We have about 1400 new cases a year, that is new patients, and it would be impossible to keep the books longer than a year in consequence of their bulk.

1976. Do you remember the man Chester? Yes, he is at present in the Hospital.

1977. Is he insane? He has periodical attacks of insanity resulting from epilepsy. At times these attacks come on frequently, and then he becomes deranged. At present I think he is almost sensible, as the attacks have been less frequent of late.

1978. Had he been officially pronounced insane when in the Hospital the first time? The difficulty of his case arose from his being sent to the Hospital by an order from Dr. Bingham Crowther. He had previously been an out-patient, coming regularly to me for months for treatment. I knew the man perfectly well, and what he was suffering from, and I said he was a fit case for the Invalid Dépôt, and gave him an order for admission thereto. He was sent to the Dépôt, and during the night he had three or four fits and became violent. The next morning he was sent to the Hospital, seeing that he was not a fit subject for the Dépôt. That was the cause of the letter in the newspaper at that time.

1979. Was the man sent to the New Norfolk Asylum afterwards? He was sent to the Asylum and shortly afterwards was discharged as well, and has been in the Hospital again since, but no violent attack has occurred since his last admission.

1980. Have you had experience in lunacy? Yes; I was for 18 months a resident officer at one of the large County Asylums in England.

1981. Do you know anything of Mrs. Evans' case? I know nothing of Mrs. Evans' case. If you will permit me, I think in asking for information in individual cases that some detail should be given. During my time of office in the Hospital between 2000 and 3000 patients have been admitted, and it is impossible for me to remember individual cases at a moment's notice, without some method of fixing the individual in each particular case.

1982. Do you remember Callan being in the Hospital? Yes.

1983. Will you state the particulars in connection with that case? Callan was suffering from typhoid fever, and was in a back ward in the upper story of the infectious wards. Two or three days before he was supposed to have jumped out of the window, he had a sudden collapse so that I gave up all hope of his recovery, thinking he must have suffered from some perforation of the bowels, such as occurs frequently in typhoid fever, but on being treated and stimulants being administered he recovered and improved somewhat. Then I was away for two days on leave, and it was on one of those days that he was supposed to have jumped out of the window. When I came on duty the next morning I heard what had happened, and when I went to see him I found he had been placed in a down stairs ward by Dr. Smart's orders. I examined him and found he had a sprained ankle and some bruises about the left ankle. He was very low, but I thought not worse than when I left him. If I had found him dead, and he had never left his ward, I would not have been surprised, for I regarded his condition as very critical before I left.

1984. Had the bruises any effect on his life? I do not think they had.

1985. Had you regarded his case as hopeless before you left on leave? I had regarded his case as hopeless, but of course after a man recovers from a relapse we always hope on.

1986. After your return did you consider his case hopeless? I regarded it as a very serious and doubtful case; so I did before the occurrence.

1987. Do you remember Lloyd's case? Yes, his was a case of typhoid fever also.

1988. Were there any peculiar circumstances in connection with his case? Yes. I was informed that he had ran out of the Hospital, jumped over the back wall, and was recaptured in the street. I was informed immediately the occurrence took place, and made immediate enquiries into it. The nurse informed me that she was standing at one end of the ward, when suddenly Lloyd burst out of the bed, and ran out of the back door, along the yard, and dropped himself down the wall at the back. He was recovered and brought back. The case was purely accidental, and might have occurred in any hospital.

1989. Do you attribute blame to any of the nurses in connection with either Callan's or Lloyd's case? No, not the slightest. It is an absolute impossibility for a nurse to be at the bedside of every patient continuously during the 24 hours, and it would be quite possible for a man to escape, and even jump out of a window, if a nurse, or even a man, were within a few feet of him. We have to keep the windows open for ventilation, especially when the fever wards are full, as they then were, and such things occur in an instant. We have so many wards that the nursing staff would have to be enormous to keep one nurse always in a ward.

1990. Did Lloyd recover? Yes.

1991. Were either Lloyd's or Callan's case of such nature as to require personal restraint by strapping down to the bed? I believe Lloyd was strapped down. It is very difficult to say the exact time a patient should be strapped down, especially with typhoid. I do not think every patient suffering from delirium should be strapped down, especially in typhoid cases. There are certain cases in which there would be very grave objections to strapping down; it would cause struggling, and do much more harm than good. I would not strap down a typhoid fever patient if I could possibly help it for that reason.

1992. Would the strapping down be carried out by your directions, or by the order of the honorary medical officer in whose charge the patient was? The honorary medical officers see their patients every day. If an honorary officer thought it necessary he would speak about it, but if a patient became violent in his absence it is my duty to attend to it. Callan had never shown any symptoms of violence before, and it is impossible to be prepared instantly for every emergency.

1993. Do you know Moody? Yes; he has been in the Hospital twice for insanity.

1993A. How long has he been under you? Each time he has been in about a month or six weeks. He has been suffering from melancholia, and refuses food. He suffers from delusions.

1994. Did he make any complaint whilst in the Hospital? He never made any complaint to me.

1995. Did you ever hear of complaints about his treatment? Only the complaint made by Dr. Crowther in the House of Assembly, "of maiming Moody."

1996. It was stated that Moody lay for a month without a bed—is that correct? Most decidedly it is not correct. No patient has ever had to lie without a bed for a single night since I took charge of the Hospital.

1997. Have you seen him since that charge was made in Parliament? Yes, he has since been in the Hospital, and I asked him if he had any complaint to make; he said nothing. He seemed averse to speaking of it. I had read in the newspapers the statement made by Dr. Crowther, and when I saw Moody in the Hospital I was curious to know how he had been maimed.

1998. Has Moody been a patient in the Hospital since Dr. Crowther made that charge? Yes, he has since been a patient under treatment for rheumatism, and for mental aberration brought on by drink.

1999. How long do you keep patients here suffering from mental disease? That is a matter in the hands of the honorary medical officers.

2000. Do you approve of persons suffering from mental disease being kept here? No, I think they should be sent to the Lunatic Asylum as soon as the medical officer is satisfied that they are of unsound mind. We have no proper method or means of treating cases of mental disease here. We have no modern method here for treating insane cases, and the quicker they are sent to the Asylum after being proved to be insane the better.

2001. Do you know the woman Lonsdale? Yes; she has been in the Hospital several times, suffering from alcoholism.

2002. Do you remember her being left for a considerable time with wounds undressed? No, I do not know of any such neglect. She has been in here several times.

2003. Do you remember Mrs. Schnell? Yes.

2004. Do you know anything about her making complaints? Her's is a very recent case—it occurred last week, and I remember it perfectly. She was an in-patient suffering from jaundice, and had a tumour in the abdomen in the right iliac fossa. She insisted on leaving the Hospital.

2005. Did she give any reason for so doing? No, she gave no reason to me or to Dr. Bright, in whose ward she was. She merely said she wanted to go home. Dr. Bright gave her permission to go home, but told her she was very foolish in doing so.

2006. After getting home she complained that she got nothing but fish—was that so? She was unable to take any heavy food. She was fed on light diet, and was unable to take even that. Persons suffering from her disease generally suffer from sickness and loathing. Her people telegraphed to me for a certificate of the cause of death, and I gave the certificate. I do not know why an inquest was held.

2007. Had she complained to Dr. Bright of her diet? I do not think so. She never complained to him in my presence. Had she asked for a change of diet we would—as we do in all cases—have given her any food she required that was not injurious. I never refuse any food that is not injurious, but sometimes patients do not know what would be injurious to them.

2008. If a patient complained to the nurses of their food, or asked for a change in diet, would it be reported to you? Yes, it would be reported to me on my next visit.

2009. Would such report be attended to? Yes, immediately.

2010. Are the provisions supplied to the Hospital of good quality? I think they are of really very good quality. Whenever they are not of good quality the Secretary calls my attention to the fact, and I reject them.

2011. Have you any difficulty with the contractors? Not much difficulty, I have rejected the butter sometimes, and the cordials were inferior and I rejected them, getting a supply from Weaver. The Secretary told the contractor that if the quality in future was not better we would get it from Weaver and charge it to the contractor. To that we got no reply, and we are now trying to get the contract cancelled.

2012. Do the patients ever complain of the quality of the food? I do not remember any such complaint being made. On one or two occasions patients have complained of the cooking, but I have heard no complaints either of food or cooking during the last six months.

2013. Is the food cooked to your satisfaction? Now and again a chop may be burned or underdone, but generally speaking the food is well cooked.

2014. Have you anything to do with the accounts of the Hospital? I do not keep the accounts, except of the drugs and surgical instruments.

2015. Do you get your drugs by half-yearly requisition? Yes, from England.

2016. Would it be better to get your drugs and stores locally as you require them? In the matter of drugs it would be much more expensive to get them locally. When we buy drugs locally we pay 33 per cent. advance on wholesale dealer's prices, and we get as little locally as we possibly can for that reason. We have an arrangement with a local chemist to supply us with what we require, and in cases of emergency we obtain drugs from him, but it is much more expensive.

2017. Does your getting drugs locally add to the expense of the Institution? Decidedly. Last year we had to supply the gaol, and this caused our drugs to run short, and getting locally what we required made a considerable difference. There was also a large increase on our demands both from in-patients and out-patients.

2018. Are you well supplied with general stores? I think so as a rule, but I have not charge of that.

2019. Do you get everything you want? I think great difficulty is experienced in getting what we really want. Sometimes the stores run short, and then we may be months waiting for them.

2020. How does the delay arise? I cannot say, but I know that sometimes after a requisition is sent in we may have to wait six months for the goods.

2021. Would it not be better to allow you to purchase what you wanted? Yes, much better, if we were permitted to purchase them either locally or in England. We would then know exactly how long it would take to get the stores after being ordered, and we would provision accordingly. Now, thinking we can get them from the Colonial Storekeeper, we let them run almost out before making requisition, but sometimes we have to wait six months before we can get them. I am sure we could buy some goods from England at half the price we are now charged. For instance, recently we wanted some knives, and requisitioned for them, but we could not get the knives unless we took the steel forks with them, and we had to take the forks although we did not want them. We were also charged a very high price for them, thus adding to the cost of the Institution.

2022. Is the stores' supply not satisfactory? Most certainly it is not.

2023. Do you get the drugs yourselves? Yes.

2024. If the same principle were applied to the general stores that now obtains in regard to drugs would a saving be effected? I certainly think so. At the Colonial Store they seem to have such a little idea of what is wanted, and there would be much less waste if we got the goods ourselves, for we would only order exactly what was required, and would only pay a fair price. They do not seem to understand what we want, and often when the goods are obtained we find they are of a certain class that we do not want; but we are bound to take them whether suitable or not, or else wait till another supply is obtained from England. It is not at all satisfactory.

2025. *By Mr. Dobbie.*—During the time you have been in charge of the Hospital has any case occurred of real malpractice or want of skill either on the part of the honorary medical officers, resident staff, or nurses? No, not to my knowledge. I do not know of any case in which a medical officer—honorary or resident—has ill-treated or maltreated a case.

2026. Do you think on the whole that the treatment of the patients is of a fairly good character? Yes.

2027. Do you think that the position of the House Surgeon is satisfactorily defined by the rules of the Institution? I do not think it is.

2028. In what respect are they unsatisfactory? In the rules he is not the recognised head of the Institution.

2029. Do you think he should be? I certainly think he should have more control over the working of the Institution than he has. As I have resigned my position, I can now say so without fear of my meaning being misinterpreted. The House Surgeon merely carries out the written rules of the Institution, and has no power over the general management.

2030. Who is the generally recognised head of the Institution? I think I have certainly been considered the head, but the rules do not distinctly state so. The rules do not recognise the House Surgeon as the head of the Institution.

2031. Should the rules be altered to make that clear? I think they should certainly be altered immediately to that effect.

2032. What is the relation between the House Surgeon and the Lady Superintendent? It is a most ill-defined relation. I consider that the House Surgeon has complete control over the nursing staff whilst in the Hospital, but not whilst they are in the Home. The rules do not state any connection whatever between the House Surgeon and the nursing staff. I think the House Surgeon should have complete control of the nursing staff whilst they are on duty, for unless he has such control over the nurses who are in charge of the patients under his charge, and can instruct them to carry out his orders in connection with the treatment of patients, his daily visits to the wards are absurd.

2033. Can you make any other suggestion which from your experience you think it desirable or necessary to make in the management? I think it would be very desirable for the House Surgeon to attend the meetings of the Board of Management, of course taking no part unless his opinion were asked. The House Surgeon should know everything that is going on in connection with the Institution. I believe the House Surgeon at Launceston attends the meetings of the Board.

2034. Does he attend the meetings regularly, or only when sent for? I believe he attends regularly. I have attended the meetings of the Visiting Committee recently, but I am not recognised, being present only by courtesy. I think the House Surgeon should have the right of attending all Committee meetings, and all general meetings of the Board of Management. I also think if he were given more administrative power he could reduce the expenditure, certainly to some extent; I mean in the management of the servants and general administration of the Institution.

2035. Can you say whether in consequence of the want of control over the nursing staff or hospital generally on the part of the House Surgeon, there has been any strained relations between the House Surgeon and the Lady Superintendent? I think that all the trouble that arose with the late Lady Superintendent was entirely owing to the want of definition of the rules in regard to the relations between the Lady Superintendent and House Surgeon. I thought I had supreme control of the nursing staff whilst on duty, and she thought otherwise.

2036. Has such a state of affairs as described by you been detrimental to the working of the Hospital in the past. Yes.

2037. Unless a remedy is provided, would such occurrence be likely to recur? It is quite possible.

2038. What position does the Lady Superintendent occupy in regard to the House Surgeon? The rules do not specify.

2039. Which of the two is superior officer? The rules certainly do not provide for the House Surgeon giving any orders to the Lady Superintendent.

2040. From whom does she receive instructions? I think she has entire control of the nursing staff.

2041. Is her position properly defined in the rules? Not in connection with the House Surgeon.

2042. Have you had experience in other hospitals where there were Lady Superintendents? Yes.

2043. What was their position? They vary. In small hospitals the House Surgeon has absolute control, subject to the Board of Management; but in larger hospitals they have, in addition to the House Surgeon, a General Manager, who, perhaps, is not a medical man, and the House Surgeon and Lady Superintendent are both under him. In a medium-sized hospital, like that of Hobart, I think the House Surgeon should be the manager.

2044. What is the cost of your Hospital per bed? The annual cost of each occupied bed in 1878 was £82 14s. 5d.; in 1879, £72 13s. 6½d.; 1880, £64 6s. 0½d.; 1881, £68 11s. 1d.; 1882, £68 3s. 6d.; 1883, £68 11s. 10d.; 1884, £68 3s.; 1885, £67 15s.; and for 1886, £68 12s. 5d.

2045. *By Mr. Lewis.*—Did the strained relations between yourself and Dr. Crowther arise in any way from your treatment of his patients? Not to my knowledge.

2046. Do you think a saving could be effected by earlier change of diet, especially extras, than occurs under the present management? In giving out costly extras, such as champagne, I am most careful, and no patient is put on champagne unless he is in such condition as to absolutely need it. The same applies to other medical comforts. I restrain the use of stimulants as much as possible, and as soon as a patient has sufficiently recovered to do without them I have the extras struck off. No patient is put on champagne immediately he is brought in unless he is in such a state of collapse that he should not have been brought to the Hospital at all.

2047. Can you change the diet on your own responsibility? Yes.

2048. Does any waste occur from the importation of drugs in large quantities? I do not think so. Drugs, as a rule, keep very well, and in most cases it takes a long time to cause deterioration. Many of them are prepared with rectified spirit as tinctures, and they would keep for years. I do not think any waste occurs through getting the quantities we do. I only order what I think we will require, and if anything extra is needed we get it from a local druggist.

2049. Can you suggest any desirable alteration in the rules in addition to those you have already mentioned? I think there are several things in the rules requiring alteration, but they would have to be gone over carefully *seriatim*.

2050. Do you think it important that an immediate revision of the rules should take place? Yes, certainly, for the reasons I have given.

2051. Are there any other points on which you would like to see a revision? Yes, several.

2052. With regard to teaching nurses and training students at the Hospital, is sufficient done in those respects as required by the rules? I think the students should be under the Assistant House Surgeon for instruction in materia medica and dispensing of drugs, but they should be under the House Surgeon for instruction in anatomy and hospital practice. I think they would learn more if each of the resident surgeons gave them some of their time.

2053. Can this Hospital be made more useful as a place of instruction for students? Yes, I think it should be more useful in that respect than it has been. I have only had experience with the last three pupils. They certainly have not the same chance here as students have in large Hospitals. At present our students are entirely under the teaching of the Assistant House Surgeon. The rules say the pupils shall be present at *post mortem* examinations, but the Assistant House Surgeon does not make *post-mortem* examinations. A very large part of their teaching should be in the *post-mortem* room, and if students are not taught there they will suffer a serious loss of information and practical knowledge. I consider quite half the work of teaching should be done by the House Surgeon. He makes all the *post-mortems*, and the students cannot now receive information in the *post-mortem* room unless the House Surgeon takes them and teaches them gratuitously, as I did. I think the honorary medical officers might also teach the students a good deal, but I think that all who take part in the teaching of pupils should receive a portion of the pupils' fees. It is done elsewhere, especially in large hospitals.

2054. Should not steps be taken to train up properly qualified nurses? The principal and almost entire training is done by the senior nurses in the wards. That is done now, and I think bedside training contains the mass of a nurse's duties. If a young nurse learns to practically nurse, and to do everything she sees the sisters and senior nurses doing, that is by far the greater part she has to learn. Lectures in anatomy, medicine, &c., are instructive, but they are not the necessary duties of nurses.

2055. Are lectures given in the Hospital? I gave one course of lectures on physiology and chemistry.

2056. Why were they discontinued? Because of the typhoid fever epidemic last year. I considered the nurses had so much to do, and were in such a state of health from heavy work, that anything in addition to their regular duties in nursing was not desirable. In fact they would not have been able to stand it. In most hospitals either the honorary or resident officers give lectures, and they are very instructive, but by far the greater part of what they should learn should be taught by the senior nurses in the wards.

2057. *By Mr. Dobbie.*—Do you think it would be better for the hospital and for its good working if the rules distinctly stated that the House Surgeon should be the superior officer of the Lady Superintendent? Yes, I think the House Surgeon should be head of all the officers of the Institution; but the Lady Superintendent should have entire charge of the Nurses' Home.

2058. From your knowledge of the working of this Hospital is it expensive? I think the expenditure could be reduced.

2059. In what direction? I do not suppose it would be popular in every way. Now the patients have everything they want, and the system of diet is fuller than usual in hospitals. Then some of the men's salaries, I think, are high. Everything a patient asks for in reason is allowed.

2060. Are some of the salaries higher than is necessary? I am not certain that the work cannot be done for less cost if we made the patients do a little more, which I think they should do. The patients should assist, and thus relieve in the work.

2061. Is that rule enforced? It might be enforced more than it is. I think the men patients might do more than they do. They do a little work in the wards, and the women are sometimes put to work.

2062. Dr. Thompson has stated that the cost of patients per head in your Hospital is £93; is that correct? Probably he includes the cost of out-patients, and other items which should not fairly be put down to the cost of the in-patients.

2063. How is the average arrived at? By excluding the medical comforts and drugs supplied to out-patients.

2064. Do you consider the cost a high one? Yes.

2065. Do you know for a fact whether the cost here is higher than at Launceston? I should think the cost here would be higher.

2066. Can you account for that in any way? I think ours is a more expensive Institution to manage. It is built on a different system, and I think requires a greater nursing staff.

2067. Do you think the staff here "wastefully extravagant" as compared with Launceston? The salary of the House Surgeon at Launceston is higher than it is here, but I think some of the servants' salaries here are very high. At Launceston the House Surgeon gets £400, here £350; the Assistant House Surgeons are the same.

2068. Could not material reduction be made? I could not say how much reduction could be made, but it would not amount to very much. I think, for instance, a man could be got to do the work of one of the wardsmen for a great deal less—but then his salary has been increased for length of service, he having been in the Institution for over ten years.

2069. Would that office require a skilled man? No; any man suitably selected could soon be taught the work.

2070. Does the new building add to the cost? Yes, the nursing staff is more expensive. Many people prefer isolated wards, but they are more expensive.

2071. Do you think the new building badly arranged? Certainly not. It is built on a system which is preferred perhaps by most, and if you adopt that system you must be prepared to pay for it. I think it is a decidedly good system if you can afford it. You could get a cheaper arrangement of wards, and supervise them with a less nursing staff, but certainly the system would not be improved.

2072. Is the building a proper building for carrying out the system it was proposed to provide for? Yes, it is.

2073. Do you know the system of the Launceston Hospital in regard to the treatment of patients? Yes.

2074. What do you think of it as a system? I think it is much more satisfactory to the House Surgeon to have cases of his own to treat, but it is not the system generally employed in the large Hospitals at Home.

2075. Would it be practicable or desirable to introduce such a system at Hobart? I think it would be practicable.

2076. Would it be desirable? I do not think the patients would derive any advantage from the change.

2077. In the interests of this particular Hospital, which do you think the better system—the system at Hobart, where the patients are entirely under the charge of the honorary medical officers, or the Launceston system, where the patients are under the Resident Surgeons? I think the system adopted at Hobart is the system usually obtaining in all the English Hospitals, where it always works satisfactorily, and here I do not think that any inconvenience has arisen from it. Neglect might occur if the medical officers, honorary and resident, were not working harmoniously, but if they work harmoniously the system is a good one, for it is much better for a patient to have the benefit of two medical officers' treatment than of only one.

2078. Dr. Thompson stated that without giving the House Surgeon separate charge of a given number of patients it would be impossible to retain the services of a good man: do you think so? I concur with him. Such a system would probably assist in retaining the services of a good House Surgeon.

2079. Would you recommend an alteration in the present system to that effect? I think so, for the reason stated; but I think it would be dividing a few patients among a great many medical officers. The Assistant House Surgeon would also probably want some beds, and there are not too many patients for the present honorary officers.

2080. Would such a system tend to cause friction between the honorary staff and resident staff? I think not. The honorary officers would have nothing to do with the resident surgeon's patients, but he would have to maintain the conduct and treatment to their patients as he does now.

2081. Would the extra work interfere with the other work of the resident officers? I think not. There would be a few difficulties in the way in regard to taking in patients. At present the four honorary officers take the patients in turns, each having those who are admitted for a week, and if the House Surgeon were given beds he would take those who came in every fifth week. Complaints might be made that the House Surgeon kept the best cases for himself. The system would be liable to be abused, and might lead to difficulties if not very carefully worked.

2082. Does the present system work well so far as the patients are concerned? Yes. I think the patients have nothing to complain of.

2083. What is the rule of the Hospital as to paying patients? The rule is that they are charged for maintenance in the Hospital according to their means.

2084. What is the maximum charge? I do not think there is a maximum.

2085. What is your highest charge? The most I have ever known to be charged was 12s. 6d. per day.

2086. What is the average charge? The charges vary, but as a rule they run from 1s. to 5s. per day. I think 1s. 6d. is about the usual charge; very rarely it exceeds 5s.

2087. How many patients have you now? Between 90 and 100.

2088. What proportion pay? They try to make all pay. It is only paupers who do not pay. The Finance Committee sit once a week, and the Secretary draws up a list of patients who were admitted during the week. Copies of this list are sent to the superintendents of police in the various districts, and they give the required information as to the patients' means. On this information the charges are based.

2089. What is the item on the Estimates for payment of £52 per year to the Registrar of the Benevolent Society for investigating into cases of out-door patients? He makes out orders for treatment of pauper out-patients.

2090. Is it necessary? Yes, but I get patients as paupers whom I feel certain should pay. The order is really made to prevent imposition.

2091. Is imposition prevented? Not in all cases, especially persons suffering from accidents. Frequently persons have come for treatment for accidents, and were ready to pay. I tell them I cannot take the money, but before they come again they must get an order from the Benevolent Society. Next time they come they have an order for treatment as paupers, although I know they should pay. The subsequent treatment should not be in the Hospital, but by a private medical man.

2092. Are the whole of the out-patients provided with such orders? Yes, only cases of emergency are treated without orders; accidents having been treated once require an order before getting further treatment.

2093. From your experience how have you found the management of the Institution carried out by the Board? I think the internal working of the Hospital is carried out by the Visiting Committee, not by the Board. I do not think the Visiting Committee do anything in connection with the internal management without the sanction of the Board.

2094. How do the Visiting Committee perform the duties of their office? I think they perform their duties exceedingly well. The Hospital is thoroughly visited by them. They meet at the Hospital every week, and every alternate week they go round the Hospital and inspect the wards, food, &c. They keep a general oversight of the Institution, and report to the Board. If anything goes wrong it is reported to the Visiting Committee, and they make investigation.

2095. Have you found that the Committee carry out the duties imposed upon them by the Board? Yes, thoroughly.

2096. *By Mr. Gill.*—Have you sufficient nursing staff? I think so, at present.
2097. What number of night nurses have you? At present we have six, three for each building.
2098. What means of communication are there between the wards? There is an electric bell in each ward, communicating with the kitchen on the same flat, and there is electric communication through the whole of the female division, and running into male ward.
2099. Would there be trouble in getting assistance if required during the night? Not the slightest.
2100. Could anything have been done to prevent Lloyd's case? I think nothing could be done to prevent a case like that. It might have occurred if two or three nurses were in the ward and quite close to him. Lloyd is an athlete, and a very powerful young man. Any nurse would be quite powerless to prevent his running out of the ward, even if she were at his bedside, and no number of electric bells could provide means for preventing an isolated case like that, and which might never occur again.
2101. Are the kitchen appliances satisfactory? No; great improvements are required there.
2102. What becomes of the refuse? I believe it is sent to the Government farm to feed the pigs.
2103. Can you suggest anything further in the direction of reducing expenditure? Nothing beyond what I have said. I think the diet is very liberal here. Certainly it is more liberal than in any other hospital I have been connected with.
2104. Do you think a homœopathic ward should be established in the Hospital? I am afraid it would disorganise the Hospital. You would want a separate nursing staff for that particular ward, and I do not think any allopathic House Surgeon would treat homœopathic patients during the absence of the honorary medical officer.
2105. Would a saving be effected if the working of the different Government establishments were made similar? I think probably it would be more economical.
2106. Do you think it would be desirable to have a General Inspecting Officer of Charities for the South and one for the North? I think they would be very important posts, and would require a great deal of care in the appointments, and in carrying out the duties.
2107. Would a saving to the State be effected by such appointments? Probably a saving might be effected, but I have not studied the question sufficiently to give an opinion on the subject.
2108. Can you suggest any alteration for the better working of the Hobart Hospital? Nothing further than I have stated.
2109. Would you approve of making the Hospital partly self-supporting? Yes, if it could be done without militating against its usefulness there could be no objection.

WEDNESDAY, 4 APRIL, 1888.

DR. PARKINSON'S *examination continued.*

He desired to point out in what way the expense of the Hospital, if it were considered essential, might be reduced; and said:—Of course I think it can be reduced. I do not say that there is any money wasted now, but if it were thought necessary to spend less the way in which such reduction could be made; I think, would be, firstly, by making patients do some work, and dispensing with one of the male servants and one or two of the female cleaners. Then the diet is very liberal, everybody getting as much as they require, and probably more than they get in other hospitals. The washing is a large item, which I do not think should be included in the cost of the Institution at all. It costs the Government nothing, as it is done in the Gaol, but we are put down for £300 in the cost of the Institution. Of course they may say that if they do not do our washing in the Gaol they might do the washing of half the town; but I do not think they could, or would be allowed to do so. It is not a proper charge to the cost of this Institution. Then I think the funeral expenses are heavy. There is £80 this year for funerals, and looking at the accounts of the Sydney Hospitals, where there are far more deaths, I see there is only about £33 put down for the Prince Alfred Hospital. Of the 150 who die here 40 or 50 are buried as paupers, and if some pressure were brought to bear in some cases friends could be made to bury their relatives.

2110. *By Mr. Gill.*—What is the cost per funeral? About 36s., and the total cost for the year is £80. It was £65 last year. These are the particular ways in which I think expenditure could be reduced.
2111. Would you approve of making the Institution self-supporting by adding wards for paying patients, &c.? I do not clearly see what you mean. Do you mean purely private wards for medical men to have their own patients in?
2112. Something after the plan of the Prince Alfred Hospital in Sydney? Yes, but I think the proper place for private hospital patients is in private hospitals. There would be a great many difficulties in the way of having paying wards for private practitioners' patients.
2113. Do you know anything of the Cascades Asylum? No, I do not know anything of the internal working of it.
2114. Would you think from your experience in your profession that it would be wise to leave that Hospital without a medical officer in charge, resident there? No, I do not think it would be wise.
2115. Is it usual? No; certainly not with insane patients.
2116. Are any claims made on relatives for funeral expenses? The Government cannot claim for funeral expenses; they can only claim for maintenance in the Hospital. I think there are patients in the

Institution who are charged more than their maintenance. The late Count Plessen and Mr. Grant were charged 12s. 6d. per day, and that must be charging for medical attendance, as it comes to £220 a-year, and the average cost of maintenance is £73. I do not think they can be legally charged so much for maintenance, exclusive of medical attendance, which is not a legal charge in the Hospital.

2117. *By the Chairman.*—Did Mr. Grant or the late Count Plessen get anything specifically extra? No, I do not think they got anything extra. No wines, for they supplied their own wines. They did not cost more than other patients, and yet are charged more, and the Hospital gets the benefit, though the Institution is only allowed to charge for maintenance.

2118. Were they treated the same? There was no extra treatment, and their diet was no better than any other patients.

2119. Suppose a reduction of expenditure were made in the directions you have indicated, would it impair the efficiency of the institution? I do not think it would be any benefit to the Hospital, and might cause a great deal of friction in requiring patients and almost forcing them to assist. Unless it is considered absolutely necessary to reduce the expenditure, I do not think it would be advisable to do so.

2120. Do you think you are over-officered, or have more attendants than are necessary for efficiency? At times there are men who have not a great deal to do, but the work varies here, and occasionally they have a great deal to do. This cannot be prevented, as you cannot get rid of men, and re-engage them when they are required.

2121. Have you a lock-ward? Yes, and Collins is in charge of it.

2122. That ward is mostly occupied? There are generally three or four patients in it, but at times only one or two.

2123. But you could not be certain of securing his services? No, that is it. Then there is the cells attendant, who sometimes has three or four cases, and sometimes none; but has also the boilers and morgue to look after, while patients under observation as suspected lunatics take most of his time.

2124. Then the cases you mention are scarcely the direction in which reductions could be fairly made? Only if it is considered desirable that the patients should assist in the work. Of course it is the rule now that patients should assist if the medical officer desires them.

2125. Would you advise such reductions being made?—would you take the responsibility? No, I should not advise adopting them; but if it is considered absolutely necessary that the expenditure should be reduced, this is the way I would set about it.

2126. You do not make use of the patients now? Yes, but it might be extended.

2127. *By Mr. Brown.*—How many beds have you at the present time? We have 138 beds, besides six single rooms for patients under observation.

2128. How many patients? At present 99.

2129. Are you satisfied with the bath accommodation at the Hospital, especially in the male building? It is not all that could be desired.

2130. And the water-closets in the old building? No; I am not satisfied with them.

2131. Would you advise anything with reference to them? Yes. They are an obsolete style, and in a very poor state. They are water-closets, but I would recommend something more modern in design. They are also inconveniently placed. You have to go through one ward to another to be able to get to the three closets, which are placed together at the end of the verandah. I think there should be a closet leading out of each ward, and a bath also, if possible.

2132. That is what I asked you with reference to the baths? It would be desirable to have baths attached to each ward in making new closets to connect with each ward. We could manage with the present baths, and always have a bath for a patient, the only difficulty being in having to take the patients such a distance.

2133. *By the Chairman.*—I gather from what you say that you strongly recommend improvements in that direction? Yes; I strongly recommend having baths and closets to each ward.

2134. *By Mr. Brown.*—At any rate you strongly recommend the closets being improved? Yes.

2135. Do you ever have any Chinese in the Hospital? I do not know that I remember one.

2136. Do you ever have any prisoners in the Hospital? Yes, we have had prisoners.

2137. How are you credited with them? I think we are credited, but the Secretary will be able to tell you.

2138. We have heard a great deal about stained linen: can you give the Commission any idea how this matter of stained linen is always cropping up? I am unable to say.

2138B. But can you give us any reason why it always crops up?—are not the sheets sometimes stained with iodine? I have seen a great many so stained.

2139. You attribute it to that? I have not heard any complaints about stained linen.

2140. Mr. Grant says a man came into the Hospital after much persuasion, and seeing some iodine stains on the bedding, said he was not going into a bed where a man had been cut up? That is certainly an illusion. Every patient coming to the Hospital is put into a clean bed.

2141. Would a strip of matting going down the centre of the wards be at all injurious? I think it would be a great advantage in preventing noise in the wards, and also in preventing the chance of slipping on the polished floors.

2142. You would recommend something of the sort? Yes, I would, very strongly.

2143. Do patients leaving the Institution ever apply for funds to assist them? We have a fund from which we supply funds to help them for the time being if they want and deserve it.

2144. Where do you get those funds from? From voluntary contributions. There is a box at Mr. Miller's, which is the principal source of supply.

2145. It is entirely voluntary? Yes. I think there is an amount of £125 to the credit of the fund at present.

2146. *By Dr. Huston.*—Is it freely given? Yes. It is subject to the control of the Finance Committee, but it is practically in my hands. I enquire into the circumstances, and if the case is a deserving one give money.

2147. Is it generally known that there is such a fund? I do not know whether it is generally known, but I think the nurses or sisters tell the patients who are troubled about what they can do when they go out to go to the doctor.

2148. Should it not be made known in some way? Of course if it were advertised it would be very largely applied for.

2149. *By Mr. Brown.*—Is it largely availed of? No, not largely, but moderately. The Secretary will give you the exact figures. Sometimes as much as £1 is given. A man may be able to get work by going to the North or to the mines, and we give him his railway fare.

2150. *By Mr. Gill.*—Is there a Hospital Sunday contribution? No.

DR. JAMES LEVER *called in and examined.*

2151. *By Dr. Huston.*—You are? Assistant House Surgeon and Dispenser at this Hospital.

2152. How long have you held that appointment? Four years on the 1st of May next.

2153. And during that time has your position been an amicable one with the honorary medical officers and your immediate superiors and other officers—have you worked amicably with the rest of the staff? Yes, very fairly.

2154. Have you had any clashing or friction with the honorary medical officers? None whatever.

2155. And your relations with Dr. Parkinson, have they been satisfactory? Tolerably so.

2156. Have you any complaint to make? No; no complaint to make.

2157. Have you any special duties connected with the internal arrangements of the Hospital? My chief duty is in the dispensary.

2158. For the out-patients? Occasionally; but my chief duty is to do the dispensing work, both for the house and for the out-patients. Next to that, to relieve the House Surgeon when he is absent.

2159. Do you not take your turn at the Hospital duties? Yes. We take alternate mornings at the front wards and back.

2160. I mean in reference to being off duty to-day and on next day? Yes. I take equal time for duty and absence with the House Surgeon.

2161. And you find that works satisfactorily? Yes; that works pretty well.

2162. Do you remember a patient named M'Donald being at the Hospital, and requiring a catheter instrument? I do not recollect the case.

2163. We have no dates to refer you to, only the man's name. There is a statement made here that he left with a catheter in his urethra, without having been relieved, and went to a private practitioner in town and had an operation performed. The man's name is said to be M'Donald? I have absolutely no knowledge of the case.

2164. Can you, by referring to your books, tell if there was a patient of that name? Yes, if I had any idea of the date.

2165. There is a bold statement made about it. Do you record all the out-patient cases? Yes, there is a book for that purpose which the House Surgeon keeps. I only enter for him in his absence. The out-patients get an order in a form which is torn out of a book, and the names are written on the butt.

2166. Perhaps you will kindly look up M'Donald's case in a day or two, and see if he was an out-patient? Yes.

2167. I think the statement is as to having a catheter inserted in his urethra, and withdrew it himself? The case never came under my notice. As to in-patients it is a very common thing to leave a catheter in for hours or even days, perhaps. I will attempt to find out the case.

2168. You have a man named Chester here now? Yes, he is a lunatic under observation.

2169. Do you know anything about Callan's case? There was a man named Callan, a typhoid patient, and while delirious he is supposed to have jumped from a window. There is no evidence of the fact except that his ankle was strained. He was found on the ground with his ankle strained, but there was really no proof beyond that to show that he had got out of the window.

2170. Was his head injured at all? No, not in the least. He could have dropped from the window without hurting himself.

2171. Could you say there was any blame attached in that case to anyone? No, I could not say there was any blame.

2172. Was the nurse in any way to blame? No, because one nurse might have to go to two or three wards.

2173. Was blame attachable to anyone in that case? No, I do not think it could be.

2174. Had any means been taken to restrain him in any way, or was it a case for personal restraint? He did not seem to be a man who would be likely to make any attempt to get out of bed.

2175. He died afterwards? Yes.

2176. Do you agree with the opinion expressed, first of all that it was a case of murder, and afterwards a case of manslaughter? No, very far from it.

2177. What did he die of? Typhoid fever.

2278. Were you present at the *post-mortem*? I am not perfectly certain from memory that I did not see the *post-mortem* with Dr. Giblin.

2179. Did Dr. Giblin make the *post-mortem* examination? Yes, I think he did.

2180. What kind of provisions do you get here—you have something to do with that? Occasionally. As a general rule, good; but once in a way a bad article is supplied.

2181. What articles? Butter and potatoes I have seen bad more than once.

2182. What did you do then? Returned them.

2183. Did not give them to the patients? Not if it could be helped; but frequently it was not discovered till these articles were served up.

2184. Do the patients complain? They have occasionally.

2185. What takes place then? Then the matter is investigated at once, and if the article is really found to be bad it is returned promptly.

2186. Suppose there is a complaint of food at dinner time, and the patients turn up their noses at meat, bread, or vegetables, what do you do then? There is no help for it in that case, as there would be no further supply for the time.

2187. Does it not involve the necessity for provisions being examined before they leave the kitchen? They should be.

2188. As a matter of fact are provisions examined before being issued to patients? I think the Secretary visits the kitchen every day. The Secretary as storekeeper usually attends to that part of the work.

2189. Is it no part of the duty of the House Surgeon? If he sees anything to complain of he calls the House Surgeon's attention to it.

2190. Is the cooking done well? Pretty fairly, but sometimes it is not done well.

2191. In what way? Meat is sometimes not well cooked, and complaints are made of chops being dried up, or fish not cooked.

2192. Do you often get complaints of that kind? Not often, but occasionally.

2193. Where do you get the milk from? From two or three sources. From the Government farm, and, I think, some comes from Brown's River, and some comes in by train.

2194. Is that always good? Yes. I think the milk is always very good.

2195. Do you scald it? I believe it is always scalded.

2196. Have you personally had any strained relations with the Matron or female staff? At one time I had with one of the sisters.

2197. You mean in Mrs. Wilson's case? Mrs. Wilson's case arose partly out of it? I had some cause to complain of Miss Turnbull for neglect of duty, and that led to the trouble with Mrs. Wilson and her resignation. Miss Turnbull, the nurse I complained of, is still here.

2198. Have you had any reason to complain of her since? Not since.

2199. *By Mr. Lewis.*—Do you do dispensing work for any other charitable institution? I supply medicines to the Gaol, and occasionally make up special prescriptions for the Gaol. I also supply medicines for the Cascades.

2200. You speak of medicines for the Cascades—do you supply these medicines on the prescriptions of Dr. Coverdale? Not on prescriptions. He sends a requisition for them in bulk.

2201. Does anybody go through the wards at meal times to ask if there are any complaints? I do not think it is the case during meal times.

2202. If a patient has any complaint to make how is it made? To the nurses.

2203. Is it the duty of the nurses to report such complaints? Yes, to report anything of the kind.

2204. Is it one of the regulations? I do not know whether it is a regulation, but it is understood, and always done.

2205. Is it possible for a patient to make a complaint without such complaint being recorded or coming to the knowledge of the authorities? I think in every case where a complaint is made it is reported.

2206. *By the Chairman.*—At all events, if a complaint is made it is attended to at once? It is never neglected that I know.

2207. *By Mr. Lewis.*—As far as you know, Miss Turnbull's conduct has given every satisfaction? I think so.

2208. Do you think that it would be advisable for the dispensing required for all the charitable institutions in Hobart to be done at the Hospital? No, I do not think it could be done. It would be more than could be carried out, unless a dispenser was appointed for the purpose. At present there is a great deal of work in dispensing prescriptions for the Hospital itself, and supplying medicines for the Gaol, and in dispensing for the Government officers and private practitioners who mark their prescriptions as having been given without fees.

2209. *By the Chairman.*—Do you do any dispensing work for New Town? No.

2210. *By Mr. Dobbie.*—Do you see the out-patients that come to the Hospital? I see them in giving them medicines.

2211. But do you see the whole of them—do all get medicines? Nearly all; the majority do.

2212. From your knowledge do you think them all suitable cases for obtaining relief at the Hospital? I think occasionally patients get in who can afford to pay.

2213. Do you think there are many patients coming who ought not to come? I think it is done.

2214. In many cases? Not in many cases.

2215. Could you suggest any means of preventing that? Hardly. They are supposed to be enquired into by the Benevolent Society Officer before they come.

2216. Are the cases you have referred to such as would not come if there were proper enquiry? I think there are cases which could not come if there were proper enquiry.

2217. Do you think the enquiry instituted sufficient? No, I hardly think it can be sufficient.

2218. How does the nursing staff work? I think they work very well indeed. There have been a great many new nurses and they are not all thoroughly acquainted with their duties, but taking them as a whole they work very well indeed.

2219. And the management of the nursing staff by the Matron, how does that work? Pretty fairly.

2220. As Assistant House Surgeon have you anything to complain of in that respect? No.

2221. *By the Chairman.*—With reference to these prescriptions you get from outside medical men attending poor patients, do you get a certificate likewise from Mr. Witt, the Benevolent Society Officer? No, not in those cases in which "no fees" is marked on the prescription, as it is not required.

2222. Do you think the Institution is imposed upon in these cases? In these cases I cannot tell. It depends entirely upon the medical man giving the prescription who initials it and marks "no fees" upon it.

2223. *By Mr. Gill.*—Do you think this Institution is as economically managed as it might be? I can hardly see where any alteration could be brought about to advantage in the way of greater economy.

2224. You cannot suggest any way in which a saving could be effected without loss of efficiency? No.

2225. Do you think private wards for paying patients could be added to the Institution as a means of making it self-supporting or assisting to pay? It certainly would assist to pay some of the expenses, but it is held to be objectionable in other ways by medical men.

2226. Do you think that if there were more and better accommodation for cases like Mr. Grant's and the late Count Plessen's it would be a great help to the Hospital? It would certainly increase the funds.

2227. Do you think any revenue could be obtained from students from the other colonies being allowed to come over here to take a course of study for a year upon payment of fees? It is open to students now, and regulations were made for them.

2228. Do you know anything of the working of the Hospitals in Sydney—of Prince Alfred Hospital, for instance? No, I am not acquainted with it.

2229. Is your nursing staff sufficient? I think so.

2230. Would you be in favour of the establishment of a homœopathic ward—do you think it at all necessary here? I scarcely see any advantage to be derived from it.

2231. *By the Chairman.*—Suppose there was a homœopathic ward here would it clash at all with your dispensary work? It very probably would do so to a great extent.

2232. It would require a special dispenser? A special dispenser and a special supply of medicines.

2233. *By Dr. Huston.*—How are students admitted? Application is made to the Board through the Secretary. There are regulations as to their fees, which are printed in the Book of Regulations.

2234. Where do the fees go to? They are paid into a separate fund, which has been lately applied in payment to the instructor of students.

2235. Who has charge of the teaching? It has been usual for the Assistant House Surgeon to have this charge. I have had charge since I have been here.

2236. Do you get any salary? Yes. I get some remuneration when there are pupils, but nothing if there are no pupils. There is no fixed scale of remuneration.

2237. Are the pupils subject to your supervision? Yes, during the time they are attending.

2238. *By Mr. Rooke.*—The medical officers who attend this Hospital have wards? Yes, each one has his ward.

2239. Does that work satisfactorily? Yes. I think it is as good an arrangement as can be made.

2240. How many are there? Four.

2241. Do you think that is sufficient? Quite.

2242. Do you think it would work better to have consulting honorary medical officers with the full responsibility attaching to the House Surgeon? I think the present system works best.

2243. You dispense the medicines here? Yes, and also to the out-door patients.

2244. Do you think the present system of getting medicines the best, or would you prefer to get supplies as wanted? I think it is less expensive to get our medicines in large quantities from England.

2245. Don't you find that the medicines get out of date? Of the old drugs a great many have gone out of date, and some have gone bad from age, but not those obtained of late years.

2246. How often do you requisition for drugs? Twice a year.

2247. Supposing you run out of drugs? The chemist in town (Mr. Miller) has a contract to supply what is required at so much per cent. in advance of English prices. I think it is $33\frac{1}{2}$ per cent.

2248. *By Mr. Brown.*—Is it usual in all hospitals and institutions for soiled linen to be used, soiled with iodine for instance? Yes, I think it is unavoidable; it may spoil the appearance, but it does not alter the article. A good deal of that is in use at the present time.

MR. JAMES SAMUEL MORRIS *called in and examined.*

2249. *By Mr. Rooke.*—What is your name? James Samuel Morris.

2250. What position do you hold? I am Secretary, House Steward, Clerk, and Storekeeper.

2251. You issue out the rations? Yes, but the Lady Superintendent has charge of the stores. She comes to me for everything, and I send the requisition in and receive the things. They are then handed over to the Lady Superintendent, placed by her in the store up stairs, and issued by her as required.

2252. How is the store accommodation? At present the store accommodation is bad; the stores have to be carried up stairs and back again as required.

2253. Do you consider the arrangements for cooking satisfactory? Yes, but the kitchen is very old. There was money voted last Parliament for a new kitchen.

2254. What is the amount per annum that is derived from paying patients? About £800. That is stated in the annual report. The report states it is satisfactory to note that during the past few years the amount of money received from patients who were able, either in whole or part, to pay for their maintenance has shown a steady increase. In 1882, £222 16s. 11d. was collected; in 1883, £470 1s. 2d.; in 1884, £593 5s. 8d.; in 1885, £613 8s.; in 1886, £789 12s. 3d.; and for the past year £884.

2255. Do you find any difficulty in collecting the money? Yes.

2256. How is it collected? We have a form which is filled up, giving the names of the patients, date of admission, age, and disease from which the patient is suffering, and other particulars. That is sent out in the case of country patients to the Superintendent of Police in the district where the patient resides, and he sends back a report as to the circumstances of the patient, which is laid before the Finance Committee. The Committee then fixes the fees, and particulars of the account is sent to the Superintendent of Police, who collects it if he can. I get in reports now and again from the collectors.

2257. Is there much not collected? A great deal.

2258. How much in proportion to the amount collected? Last year there were £800 collected, but there would have been as much again if everybody had paid. I know of several cases, where the fees have been fixed as low as 2s. a day, but the bills have mounted up to £30.

2259. Is there any fixed rate of charging? Five shillings a day is the ordinary charge for persons entering the Hospital. Some are charged even a little more than that, but the majority are charged from 1s. 6d. a day to 5s.

2260. What is the average cost per bed? It has been £68 for the last five years.

2261. You have charge of the medical comforts, such as wine and spirits? Yes, I have an order for everything used from the doctor. There was a large increase last year in almost everything used.

2262. How do you account for that? Number of cases of typhoid fever treated.

2263. It did not occur through any change of system? Not at all.

2264. Are the wines, &c. good? There was a meeting of the honorary medical officers not very long ago, and they represented the matter to the Government, and a better supply has been obtained.

2265. How long have you been in your present position? Six years.

2266. Can you point out to the Commission where any expense can be saved in the general management of the Institution? No, I cannot; everything is kept down as much as it can be consistent with efficiency.

2267. Are there any Chinese patients? I do not recollect seeing more than two Chinamen since I have been here. There was once the cook of a vessel sometime in the Hospital, and his fees were paid by the master of the ship.

2268. Are there any improvements you can suggest in the outbuildings? No, they are just on with some improvements now—they are soon going on with a new kitchen.

2269. Do you think the baths sufficient? I think so. Of course, in a large establishment like this, things are nearly always getting out of order. There is nothing calling for immediate improvement? I pointed out to some of the Members of the Board that there was water dripping from each cistern in the new Hospital.

2270. Do you economise the fat and refuse? That all goes out to the New Town Farm. Nothing goes to waste.

2271. *By Dr. Huston.*—You are responsible for collecting the fees? No, I instruct the Superintendents of Police in the different country districts.

2272. How is it managed in the Town district? Mr. Catley collects these.

2273. Are the fees collected on commission? Yes, at 10 per cent.

2274. Who gets that commission? In country districts the Superintendents of Police, and Mr. Catley also gets 10 per cent. There is more trouble in collecting the fees than in anything else in connection with the Hospital with regard to my work.

2275. You say the fees are fixed shortly after the patient comes in. Yes, after we get the particulars.

2276. Don't you often let patients be in the Hospital a long time before getting the particulars? Yes, and very often I cannot find out particulars. Sometimes it took months to find out the locality to which a patient of the tramp class belonged. Every effort was used to collect the fees in town, and they were continually bringing people up at the Police Court for nonpayment of fees. Sometimes the Magistrate gave an order to have the money paid up in instalments, and sometimes he gave no order at all.

2277. *By Mr. Rooke.*—Are there any fees collected before the patients go out? Very seldom.

2278. Don't you think it would be much better to do so? I got instructions to do that, but on several occasions, when I went to patients who were bad and told them or their friends, they were removed from the Hospital.

2279. *By Dr. Huston.*—You are aware, that out at New Norfolk Asylum the patients are paid for every month. Yes; out at New Norfolk they go in for such a long time.

2280. *By Mr. Rooke.*—Don't you think the system could be improved so that so much money would not be left uncollected? I think they should appoint somebody as Bailiff to the Institution, instead of leaving it to the Collectors.

2281. You think it wants a different system? Yes; that would bring about a better system.

2282. *By Mr. Brown.*—Have you ever any prisoners in the Hospital? Yes, one.

2283. How did you charge that patient? We book credit for the fees, but no money actually passed. There was only one prisoner last year. The same rule applies to members of the Permanent Force. We take credit for them in the same way.

2284. *By Dr. Huston.*—The washing is done at the Gaol? Yes, the washing for the Hospital; but not for the nurses home.

2285. The Hospital is charged with that? Yes.

2286. To what extent? About £250. It was over £300 a year, but we objected to the high charge. They charged us as high as 6d. for each article, such as quilts, &c., and the Government wrote to know how it was that in Launceston the charge was so much less than it was in Hobart; so the Superintendent of the Gaol made a reduction of nearly 50 per cent.

2287. How are you charged from the Gaol? They send me in the bill, and I send it on to the Stores Office. I debit the Hospital with it, and the Treasury also debits us and gives the Gaol credit for it. No money passes hands.

2288. What about the medicines supplied to the Gaol? For that we get credit at so much per patient per day.

2289. *By Mr. Brown.*—But again no money passes? No, but if we only send a knife to be repaired they charge for it.

2290. *By Mr. Rooke.*—Do you find that there is any difficulty in getting repairs executed? If there are any immediate repairs required, such as a pipe burst, I send in a requisition to the Government, and at the same time send for a plumber.

2291. Then you do not find any difficulty in getting repairs? Not in the long run.

2292. *By Dr. Huston.*—There is a fund called the Samaritan fund? Yes, it is collected by private subscriptions.

2293. How is that fund used? It is used on the certificate of the House Surgeon, and is given to necessitous patients when leaving the Hospital. No money is given to the patient, unless one shilling for a night's lodging or anything like that, but we pay their passages to the place they are going. For instance, if a patient on being discharged wishes to go to New Norfolk, he is sent down to the steamer *Monarch* or the train in charge of one of the attendants, who pays the person's passage.

2294. Is aid from this fund frequently applied for? I have a list of each month's expenditure. We have expended £2 18s. a month, 15s., 5s., and down to 3s. and 2s. 6d. I get a receipt from each patient as they leave the Institution, and every month that is placed with all particulars before the Finance Committee.

2295. *By Mr. Rooke.*—Is it generally known in the Hospital that there is such a fund for the relief of poor patients? Oh, yes. We never send anybody away unless they have a place to go to. If they have no money, their passage is paid where they want to go to. We seldom give a patient any money.

2296. There is another fund—a Medical Students' Fund? Yes; and that is partly given to the Assistant House Surgeon, who has charge of the students. It is given by order of the Board of Management.

2297. *By Mr. Dobbie.*—Does he get the whole of these fees? No.

2298. On what principle, then, are they distributed? On no principle at all.

2299. Well, how are they distributed? The fees are paid into the bank, and the Board takes Dr. Lever's services into consideration, and allows him for work performed.

2300. What becomes of the residue? It is left in the bank, and sometimes part of it is applied for the instruction of students. They recently got a skeleton which cost £19 or £20.

2301. Then it accumulates into a fund for the benefit of pupils hereafter? Yes.

2302. Have you a balance at present? Yes; £60 8s. 7d.

2303. *By Mr. Rooke.*—What balance have you in the Samaritan Fund? £138 14s.

2304. Do you think this fund might be better applied? The distribution of the fund might be applied more liberally to patients going out who are destitute.

MR. C. H. GRANT *called in and examined.*

2305. *By Mr. Rooke.*—What is your name? Charles H. Grant.

2306. How long have you been a patient in the Hospital? Three weeks and two days.

2307. Are you satisfied with your treatment generally? In every way. I am thoroughly satisfied with the attendance and food. Everything seems to me to be as comfortable as could be desired, not only for myself but for all other persons. I was in the general ward 10 days before coming here.

2308. Then you are of opinion that patients have every reason to be satisfied? Yes, so far as I have noticed. The food has been admirably cooked and well served for its class.

2309. In fact, from your treatment you would recommend anyone to come to this Institution to be treated in a severe case? Most certainly so. I think it only requires that there should be private wards for people outside to take more advantage of the Institution. The medical attendance is all that could be desired. The honorary officers are very kind, and also the resident surgeons. I think the advantage of treatment here is so great that the outside public would be glad to avail themselves of it providing that there were private wards, and that the medical profession could be arranged with.

2310. Do you think that if there were private wards they would be taken advantage of? I think so, to a great extent. Of course there are drawbacks in the general wards. If a patient were nervous, and became acquainted with the ailments and heard the moans of others, he would not feel so comfortable as in his own home. Otherwise the attendance is so good and uniform that it is preferable.

2311. You are aware that there have been representations that people are not well treated here? I have heard so.

2312. From your actual experience you do not believe it? I do not think they have any reason whatever for complaint.

2313. You have had the same food and beef-tea as the others? Yes, and it was very good.

2314. *By Dr. Huston.*—Are you satisfied with the fees they charge you? I do not know what it is yet, but I should be willing to send a cheque for anything charged. I think that those who can should pay, and that there should be a scale of fees. Arrangements should also be made that private paying patients should have a different dietary if desired.

2315. *By Mr. Brown.*—Do you find the linen clean? Yes, and it is very frequently changed.

2316. Have you seen stains upon it? I have seen it stained from preparations such as nitrate of silver, iron, or iodine, and ignorant people might think that that was caused by something else.

2317. What do you think of the supervision? The system of supervision is very good, and the result is that the patients are very well looked after.

MR. PATRICK KENNAR, a Patient, *called in and examined.*

2318. What is your name? Patrick Kennar.

2319. How long have you been in the Hospital? A fortnight last Monday.

2320. What did you come in with? Consumption.

2321. Have you been treated well? Yes.

2322. Is the attendance of the nurses good? Yes; could not be better.

2323. Has the food been good? Yes.

2324. What about the linen—do you get a change sufficiently often? Yes; a clean shirt every week, and the bed linen is changed frequently.

2325. Is the beef-tea good? Yes.

2326. Have you anything to complain of? No.

2327. You are really better treated than where you came from? Yes.

2328. That is your decided opinion? Yes.

2329. You mix with the other patients? Yes.

2330. Do they complain at all in your hearing? Not in my hearing.

2331. They all seem to be satisfied? Yes.

THURSDAY, APRIL 5, 1888.

MR. WILLIAM COLLINS *called in and examined.*

2332. *By the Chairman.*—You are a Wardsman in the Hospital? Yes.
2333. How long have you been here? About 11 years.
2334. Do you remember a man named M'Donald being treated here? Yes.
2335. What was the case? He was here two or three times.
2336. Was he an in-door patient? He was an in-door patient on three occasions.
2337. Do you remember the occasion when he had something the matter with his bladder? It was always a stoppage of water he suffered from.
2338. As an in-door patient? Yes. He came in three times with a stoppage. The last time he was in was about 12 months ago, and he stayed three days then.
2339. From your knowledge was the man suffering from any neglect after an operation? No. He told me he had been in two or three times as an out-patient, but did not stop.
2340. Did the man have any operation performed on him? Only the instrument inserted to pass the water off.
2341. Did he make any complaint? No. He was always very well pleased.
2342. *By Mr. Dobbie.*—To your knowledge did this person ever leave the Hospital with a catheter in his urethra? No. As soon as we drew his water we took the instrument out.
2343. Could it have happened without your knowledge? No.
2344. Were you always in the ward where this man was? No, not always there; but I was looking after it.
2345. This patient was under your attention, and what is stated could not have happened without your knowledge? No.
2346. *By Mr. Brown.*—The last time he came it was as an out-patient, and you attended on him then? I do not know what happened to him as an out-patient.
2347. Do you know who treated him upon that occasion? Whichever doctor was on—I think it was Dr. Parkinson. The man was very well satisfied whenever he was in the Hospital.
2348. *By Dr. Huston.*—If that man states that he went away with a catheter in his bladder or in the passage to the bladder, and had to withdraw it himself, and then go to a private practitioner to get his water withdrawn, can that be the case? It might have been done when the man was an out-patient. I do not know anything about that.
2349. Are you in charge of the lock ward? Yes.
2350. Is it generally full of patients—what is the average? There are generally seven or eight, sometimes more, and sometimes only three or four.
2351. Are there ever any complaints on the part of the patients? No.
2352. They are satisfied with their treatment as a rule? Yes. I could pick out 100 cases in town, all of whom were satisfied.
2353. Make any complaints of their food? No, I have never heard any complaints.
2354. Or general attention? No complaints as to general attention either.

MR. JAMES S. MORRIS *recalled and examined.*

2355. *By the Chairman.*—Do you remember anything about the case of a man named M'Donald? Yes.
2356. Will you tell the Commission what you remember about it, and what M'Donald complained of? He was charged 1s. a day, being a Corporation labourer, and his bill came to 6s. When he brought it down to me he made a sort of half complaint to me that the place was not like it used to be, and he did not like the treatment. I asked him if he was all right, and he said "Yes, all right." I said, "Suffering from a complaint like yours you may have to come to the Hospital again, and unless you have something definite to complain of you had better not say anything about it."
2357. Did you know anything about a catheter having been left in the man? No, I do not know anything about it, only that Dr. Lever has mentioned the matter to me this morning. He simply told me the place was not what it used to be. I have known him for many years, and told him he might be in again in a few days, and unless he had any great complaint he had better not say anything about it.
2358. *By Mr. Brown.*—You only spoke to the man as an in-patient? That is all.
2359. He was here as an out-patient? He was here frequently.
2360. Patients might come here to have a catheter passed, of which you would not know anything about? Yes, many people might come for that purpose and I would not know anything about it. I know M'Donald has been here in the middle of the night with a stoppage in his water, and he has always been attended to when he came.
2361. Do you remember who was medical attendant on the out-patients then? I think, Dr. Parkinson, for I remember the man telling me that Dr. Holden was always able to pass the catheter for him.
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MISS MUNRO called in and examined.

2362. *By the Chairman.*—You are Lady Superintendent of this Hospital, and are in charge of the nursing staff? Yes.

2363. Do you have any complaints at all from the patients? No, I cannot say I have any important complaints from patients.

2364. How are your relations with the House Surgeon? Very good.

2365. And with the Board also? Yes.

2366. With regard to the quarters for the nurses, are they what they should be? They are satisfactory. They are very suitable, but not large enough. We have not sufficient sleeping accommodation for the nurses.

2367. You have had experience in other hospitals before you came here—do you approve of the system adopted here of giving the charge of the wards to three or four honorary medical officers. In Launceston, you know, the house surgeon has charge of the patients, and the honorary medical officers are merely consulted by him; which of these systems do you prefer? I do not approve of the Launceston system, but I have not worked under that system.

2368. In connection with this hospital there is what is called a Samaritan Fund? Yes.

2369. Do you know how many patients become recipients? I do not know anything at all about it.

2370. Do you not recommend any cases? No.

2371. Do you think that many patients require assistance? Yes, very many of them.

2372. The general stores are handed over to your charge, I believe? The dry stores—yes.

2373. Is the accommodation for these stores good? It is rather high up, creating a difficulty in carrying things up and down.

2374. You only get these stores once in six months, I believe? We requisition for them every six months, but they come up at any time.

2375. Which plan do you think it would be better to adopt, to pay for stores as you require them or keep them in stock as at present? It would be better to purchase as we require.

2376. Is there any quantity of stores lying idle in consequence of the present system? A good deal. I think it would be preferable to purchase as we require.

2377. Is the food supplied to the patients satisfactory, in your opinion? It is very good indeed all through.

2378. Do the patients ever complain of it? Very seldom.

2379. Is there anything at all that you could suggest as an improvement requiring immediate attention? Our supply of linen is not always satisfactory. It was very short indeed when I came to the Hospital, and the linen we asked for in July last were only received in January and February of this year, and we have been very badly off for them.

2380. Do you find any difficulty in getting these things when you report that they are wanted? Very great difficulty. As I have already said, the sheets asked for in July last year were only received during the last two months, and patients suffered a good deal in consequence.

2381. You have patients under your care suffering from *delirium tremens*—do you find that satisfactory? I do not think we should have anything to do with male patients of this class. We find it a source of inconvenience and trouble.

2382. Are you of opinion that the nursing staff is sufficiently strong? Yes, there are sufficient nurses at present.

2383. Is there anything else you would desire to add to the evidence you have given? Well, I might mention the accommodation at the Home. We have only accommodation for three night nurses, and three others have to be accommodated in a room above this board-room.

2384. I suppose the supply of medical comforts for the patients is ample? Yes.

2385. *By Dr. Huston.*—I think you stated that your relations with the medical staff are pleasant? Yes.

2386. No strain? No; I have had no unpleasantness at all.

2387. And your relations with the subalterns? There is no trouble whatever; all going on satisfactorily.

2388. Are your relations with Nurse or Sister Turnbull satisfactory? Yes, quite.

2389. You have stated that linen stores asked for last July were only just delivered—were they asked for last half-year or for the current half-year?—you know that stores have to be requisitioned six months in advance? I did not think that was necessary.

2390. When you asked for them in July did you require them at once? Yes.

2391. And you did not get them? No.

2392. Is that usually the case? It is the first time I required anything.

2393. You have no difficulty in getting stores required from the local storekeeper? Everything is handed over to me when it arrives.

2394. Are you satisfied that the food is good and properly cooked? Yes, it is very good indeed for the patients.

2395. Any complaints about the nurses' food in that way? They sometimes think it rather monotonous, and wanting in variety.

2396. Are they confined to the rations received in the Hospital? Yes, we have a separate ration.
2397. You get no extra food? No, nothing but the fixed diet.
2398. *By Mr. Dobbie.*—Are you satisfied with the arrangement by which the dry stores are handed to you? Yes, I think it is the best arrangement.
2399. Is the nursing staff here the same as at other hospitals, or larger? It is not so large as at other hospitals elsewhere.
2400. Then the expense in that respect is not so great as in other hospitals with which you have had experience? No, except that in hospitals at home the salaries are not so high. The total expense here is not higher than elsewhere.
2401. What would you think of Dr. Thompson's statement that the salaries are simply wonderful here? That would not apply to the nurses. From what I know of Sydney they are a little higher there.
2402. The number here is rather less? Yes.
2403. What about the bathing accommodation at the hospital? In the old hospital it is not very satisfactory; but in the new it is very good.
2404. Do you think the bathing accommodation in the old hospital requires improving? I do think so. The bath-room is a small place in the same room where the patients' dishes are washed up.
2405. Would you recommend alterations being made in that particular? Yes, I think so, and in the closets of the old hospital, too.
2406. As to the Nurses' Home, would you prefer the Home being on the Hospital grounds? I like that home over the road very well, except in winter, when it is trying for the nurses to have to cross the street. I think it is better to have the Home near the hospital buildings.
2407. There is a proposal to erect a Home on the grounds? Yes, I think that is sufficiently far away from the hospital.
2408. *By Mr. Brown.*—In connection with the night nurses, what arrangements have you for obtaining assistance should it be required? We have a sister in charge of the hospital at night, and she goes from one ward to another.
2409. But suppose extra assistance were required? If there is any prospect of that, I tell the sister in charge to wake one of the day nurses.
2410. Is there any telephonic communication between the Hospital and the Home? No.
- 2410A. Do you not think that is desirable? It would be very convenient.
2411. Do you not think the different wards should have a strip of matting laid down their centres to deaden the sound of walking? Something of the kind is required occasionally, and in the accident ward it is very frequently required; but we do put down strips of matting in serious cases.
2412. *By Mr. Gill.*—Have you ever been connected with a hospital where they have paying patients as well as free? No.
2413. How do you think it would do to have private wards for paying patients? I think it would be a good plan, for there is no place in Hobart where private patients can be taken to.
2414. You know that various remarks have been made outside about soiled linen for the patients' beds. Have you not been compelled to use linen stained with iodine? There are stains on some sheets; I do not know whether it is iodine or not.
2415. You know it to be the case that patients have mistaken these stains for blood marks? Yes, and in cases where chloride of iron is used, for that makes the same stain.
2416. *By Dr. Huston.*—Are patients kept clean while under your care? Yes, I think so.
2417. Do they ever make any complaints? I do not remember exactly any case; but I know one, of a mother who complained of her child's head not being clean.
2418. You do not recollect the name—was it Evans? No, I do not.
2419. Was the complaint a fair one? It might have been; I could not tell. The child was taken home, and the mother said its head was not clean.
2420. Was it in the Hospital any time? I think it was there for some considerable time.

MISS MARGARET J. TURNBULL *called in and examined.*

2421. *By the Chairman.*—You are a Sister attached to this Hospital? Yes.
2422. How long have you been here? Three years.
2423. Do you find that your relations generally with the Lady Superintendent and the House Surgeon are pleasant? Yes.
2424. There was some unpleasantness? Not since the arrival of the present Lady Superintendent.
2425. Nor any unpleasantness with the honorary medical officers? No.
2426. Are your quarters satisfactory? Yes, as far as the premises will admit. We have not separate bedrooms at present.
2427. Is the supply of food, the cooking, the bath rooms, &c., satisfactory to the patients? The patients do not complain with any reason; but sometimes, of course, patients complain without any reason. The beef-tea may not be so good at one time as another, but on the whole the food is very good.

2428. Is the bath accommodation sufficient? Quite sufficient.

2429. Do you have anything to do with patients who are sent to the Hospital suffering from *delirium tremens*? Yes, female patients.

2430. Is it satisfactory to have them here?—are they violent sometimes? Yes, not so much in cases of *delirium tremens* as in cases of insanity.

2431. Do you consider that works well, or does it upset the system at all? It upsets us a great deal, as it takes two or three nurses to attend to one case at times.

2432. Have you anything to complain of at all with reference to the management of the Institution? Nothing at all to complain of.

2433. *By Dr. Huston.*—You say everything works smoothly at the present time? Yes.

2434. Without going into any particular case, there has been a time when things did not work so smoothly? Yes, there was a time.

2435. Can you say where the cause of that originated? I think, considering, I was so much mixed up in the matter, it would be better to put that question to some one who could give an unbiased opinion.

2436. You say you sometimes do get complaints from patients? I cannot say I get complaints from the patients, because my patients have not complained.

2437. Do you know of any? No, I do not think I can state a case I know of.

2438. Do they complain of their food? They may complain of its being too sweet or too salt. The butter or eggs may be bad at times, but it is not a regular thing.

2439. Have such complaints been often made? Not often.

2440. If any complaint is made, would it be at once investigated, and measures taken to remedy it if cause of complaint existed? It would be reported by the Lady Superintendent to Mr. Morris, who would report to the grocer, and the article would be better next time.

2441. As a matter of fact, have cases of that kind been properly remedied? I think so.

2442. *By Mr. Brown.*—In speaking of the bath accommodation as being satisfactory, did you refer to the old Hospital? To the female wards only.

2443. Is there sufficient bath accommodation in the old Hospital? I think so. You only want to bath one patient at a time.

2444. We have it in evidence that there is a necessity for increased bathing accommodation? Well, I do not know the reasons for wishing it to be increased.

2445. *By Mr. Gill.*—You have had a good deal of experience as a nurse? Yes.

2446. Could you suggest any plan by which this Hospital could be worked better than it is? No.

2447. Do you think it perfection, then? No, I do not think it perfection, but it is as good as any one I have come across. It is very well managed indeed.

2448. Do you think it would be well to have paying wards for private patients? That, I think, would be a question for the doctors.

2449. They do not like it, of course, but would it be an advantage to the Hospital? You would have to increase the nursing staff.

2450. Of course; but would it be an advantage to the Hospital? Yes, if arrangements were made for it. It would require a larger staff of nurses, for paying patients would require better attention naturally.

2451. How many day nurses have you on duty at once? I have two, one junior and one senior.

2452. And a sister over these? Yes, in the day time; but at night there is one sister in charge of the whole.

2453. Do you think that quite sufficient? Yes, the nurses who are on at night are senior nurses.

2454. Suppose you have a refractory patient at night time, how do you arrange for obtaining assistance? We have bells by which the night sister can be summoned, and she can call another nurse from the Home if it is required.

2455. Have you any communication with the Home by telephone? No, the night sister has to go across. But as a rule we have not bad cases in each of the wards.

2456. Would you suggest having the telephone laid on to the Home, so that you could communicate from the Hospital at any time? It might do, but I think it is hardly necessary, and it would result in the Lady Superintendent being called up to answer in every case.

2457. *By Mr. Brown.*—With regard to the sitting room in the new Hospital, is it in every way a convenience? I have not used it at all, but I should think it was.

2458. Has any complaint been made by any of the nurses as to the want of accommodation over there either in the night and day sitting room? They are not allowed to sit in it in the night time. I should think it was quite suitable.

2459. *By Dr. Huston.*—At what time do the night nurses come on? At 9 o'clock, and are on duty till 7 o'clock in the morning.

2460. *By the Chairman.*—There have been several allusions as to what happened before. Now, there was a complaint laid against you before, and after taking evidence you were exonerated,—is that so? Yes, that is so.

THURSDAY, APRIL 5, 1888.

MR. CHARLES HARBOTTLE *called in and examined.*

2461. What is your name? Charles Harbottle.
2462. You were an inmate of the Hospital? Yes, in June, 1886.
2463. How long were you there? About 27 days.
2464. Did you have a private ward, or were you in the general room? First of all I was in the accident ward, and afterwards in a room by myself.
2465. You were some time in the general ward? About a day and a-half in the accident ward.
2466. You have been a member of the Hospital Board *ex officio*? Yes, and before I was a member *ex officio*, I was an elected member.
2467. What is your opinion of the general treatment in this Hospital? My own opinion is that no words that any person can use could speak too highly in favour of the Institution.
2468. Was the attendance good? Yes, the attendance was good of both nurses and doctors. The food and anything else required did not require to be asked for; they seemed intuitively to guess what was required.
2469. Then from what you saw around you, you thought the general body of the patients are well looked after? Yes, from what I saw in the accident ward. While I was in the private ward my wife was constantly coming backward and forward, and visiting the ordinary wards, and she saw there that the attendance to the whole of the patients was the same as it had been to myself.
2470. Then you think that people can come here with perfect safety, and that there is nothing in the reports about uncleanness. Nothing could be cleaner, not only in my own bed, but also in the beds of the other patients.
2471. We have been collecting evidence about paying patients—do you consider the charges too high? I think they are very low indeed; I do not remember the amount I was charged, but I thought it low and very reasonable.
2472. In connection with the paying patients do you think it would be judicious or better for the Institution if private wards were allotted for paying patients? I know doctors are very much opposed to it, but from my own experience I think it would be a boon to the community.
2473. *By Mr. Brown.*—The food you got was the same as was used in the Hospital generally? Yes, and the only thing that a person very fastidious could complain of was, perhaps, with reference to the beef-tea, that there was a little too much fat left on the top. That was a matter of cooking entirely. The cooking was very good, and the food of good quality, and generally speaking put before the patients in such a way that a fastidious person could not find fault.
2474. *By Mr. Lewis.*—Did the account of charges rendered you include anything for medical attendance, or was it only for your maintenance while in the Hospital? I can hardly say, but I think it was just for maintenance in the Hospital. I can bring the “memo.” down and have it added to my evidence.
2475. If there were private wards would it not be necessary to have a charge made for medical attendance? I think so; and I think that people coming here as visitors from the other colonies and taking ill would be very glad to have such accommodation, and would not object to any charge for medical attendance if they could have the blessings of the Hospital.
2476. Could not that difficulty be got over by having this as a purely charitable institution, and having a private hospital quite distinct from this Hospital? I suppose so. At present there would certainly be a difficulty, as this Institution is entirely paid by the State.
2477. *By Mr. Rooke.*—Are you a member of the Board now? No, I was only a member from June, 1886, to last December.
2478. What is your opinion as to how the Board is constituted?—do you think that there are too many or too few members? I think that with the Committees the Board is very well constituted indeed, through having some members appointed for the Finance Committee, and some for the General Committee. They do the work amongst them, and bring it down to the general body. I think that perhaps if there is any fault at all it might be that you could do with a few less members.
2479. Would you consider the Board improved if some of the members were elected by the general public? No, I do not think so,—in fact I do not see how you could elect from the general body. How would you make your electoral district?
2480. You think the public are already represented? Yes.
2481. Suppose it was carried that subscriptions be given to the Hospital and that subscribers elect a certain number, would that be an improvement and make the Board more in touch with the public? That would do away with the entirely charitable.
2482. Do you think that that would be better? I think the present system would be better until the character of the Hospital is altered.
2483. There have been some strained relations in the Board? Yes.
2484. Do you think that had anything to do with the *personnel* of the Board, or was it due to the management inside? I came into the Board during the squabble, and I think that the members of the Board did honestly and conscientiously what they believed to be correct.
2485. Do you approve of the honorary medical officers voting and taking part in the deliberations of the Board? Yes, I do, because they devote a great deal of time to the hospital, and I think that they are almost better qualified to give an opinion on matters coming before the Board than the lay members.
2486. Do you think the present system, of having wards and medical officers attached, a good one? Yes, I think it is good for the interests of the hospital and the public generally.

DR. GIBLIN *called in and examined.*

2487. What is your name? E. O. Giblin.

2488. You are one of the honorary medical officers of the Hospital? I have been elected an honorary medical officer, but my appointment has not yet been gazetted.

2489. But you know something of the Hospital? Yes, I have been acting as honorary medical officer for the last six weeks.

2490. As far as you have seen of general management, are things going on satisfactorily? Very satisfactorily indeed. I have never had a cause of complaint, or seen anything I have objected to.

2491. You are aware of the practice at Launceston to have consulting surgeons, who are called in when necessary? Yes.

2492. Do you think it would be a judicious change to have that here? No, I think there would be too much work for the house surgeons, and far too much responsibility for young men. I should be sorry to be one of them.

2493. Do you think it would be judicious to extend the hospital accommodation, so as to include paying patients—that is, to have wards for paying patients? No. Under the present regulations a great many take advantage of the hospital, and obtain the best advice from the honorary medical officers, who are in no way remunerated for that work. To extend that would, in my opinion, be a great injustice to medical men who are honorary medical officers.

2494. You are aware that there have been several cases reported in which it was said that there was neglect and malpractice? Yes.

2495. You remember the case of Callan? Yes.

2496. He died in the Hospital? Yes.

2497. Did you attend the inquest? I made the *post-mortem* examination and gave evidence at the inquest.

2498. What was your opinion of that case? He died of typhoid fever. He had all the symptoms of typhoid, and ulceration of the bowels.

2499. Could it be possible that his death resulted from violence or from a fall? He had also a bruise on one of his ankles, which I believe occurred from the patient jumping out of the window.

2500. Would that be sufficient to cause death? No; there was no evidence that it even accelerated death. There was no bruising or hemorrhage to show that jumping out of the window had a serious or fatal effect.

2501. If a case like that occurred in course of a number of years, would you consider it evidence of gross mismanagement? I think it is sufficient to make the authorities exercise due caution, but I do not think that they are to be charged with gross neglect or mismanagement because a delirious patient does such a thing. If I remember the case correctly, the patient up to that time had been quiet.

2502. It would not amount to manslaughter or murder? In no sense of the word. The man did not really die from the fall, but from typhoid.

2503. Do you consider the nursing staff efficient and effective? It appears to be so, if they are brought up to the number, but I think that there is sometimes a little difficulty in getting nurses.

2504. Do you consider the patients well attended night and day? Excellently; I think they are well attended.

2505. Can you suggest anything that wants immediate alteration or improvement? No; I think the Institution is an excellent one in every sense of the word. I know what the Hospital was 17 or 18 years ago, when I was there for two years as a medical student, and I think it a far better Institution and far better managed than it was then.

2506. Have you known any case in which there was neglect or malpractice? None whatever; the case of Free, of course, was the subject of public criticism, but in my opinion that was not malpractice.

2507. *By Mr. Lewis.*—From your knowledge of patients and public opinion in town, do you say that there is an entire want of confidence in the Hospital? No, the reverse is the case entirely. I have no difficulty whatever in getting patients to go into the Hospital, and that is the best answer to that question.

2508. Do you think that sufficient is done in the Hospital to provide amusement to the patients, and pictures, ornaments, &c.? Yes, I should say quite sufficient. I think it is a great mistake to do too much in that way, especially in sick wards. The difficulty is rather to keep things quiet, and minimise the number of visitors.

2509. Are you in favour of providing wards for the reception of paying patients, whereby they would not only pay for maintenance, but also medical attendance? I think it would be inadvisable.

2510. Do you think it fair to the medical profession that certain people, chiefly strangers, should be admitted to receive medical attendance free? Most unfair, if they are able to pay.

2511. How would you remedy that—you cannot exclude them? No; but the remedy would be very soon found if there were a sufficient number of such patients to make it worth anybody's while to build or furnish a private hospital. There are private hospitals in Melbourne and Sydney.

2512. Do you think it is likely in the next few years that there will be sufficient inducement to make any medical man undertake such a work? I have heard it mooted, and such a thing has existed on a small scale in Hobart, in the time of the late Dr. Crowther. I believe he had a small hospital at Highfield Hall.

2513. Even though there was a private hospital, you could not prevent anybody coming into the General Hospital? No, we could not prevent it, but it is a thing that should not be encouraged. My idea is that this Hospital is a charitable institution for poor people. It is on that basis, and on that basis alone, that the honorary medical officers give their services. I think it should remain a charitable institution, and that any tendency to extend it in the direction indicated should be restricted.

2514. *By Dr. Huston.*—Do you not think it would be desirable to have a few more private rooms, supposing that parties who can pay expressed a wish to be taken to the Hospital? Yes, I think that there are certain cases which are better treated in hospital—such as surgical cases—than in private houses. Unless it was really a private hospital, I have no doubt the honorary medical officers would only be too glad to encourage such a thing as that if not carried too far.

2515. Do you not think it is desirable, as the accommodation is limited, to have added three or four private wards or rooms for patients of that class in case of accident, if they expressed a decided wish to be taken to the Hospital? I am not prepared to answer that question offhand. It would be advantageous to the Hospital to have two or three small wards, which might be used on emergency, but I am not prepared to go the length of saying that they should be filled and used entirely by paying patients. The advantage of having small wards is apparent in the case of operations which have to be treated in separate rooms. I think it would be advantageous to an extent to have smaller wards.

2516. *By Mr. Dobbie.*—If an operation has to be performed are the appliances all they should be? So far as I know, they are.

2517. Is there a proper table? There is no operating table with rack adjustments.

DR. GAMALIEL BUTLER *called and examined.*

2518. What is your name? Gamaliel Henry Butler.

2519. You are attached to the Hospital as honorary medical officer? Yes.

2520. How long have you been so? For the past 12 months.

2521. Do you consider the present work in the Hospital satisfactory? Yes, as far as the nursing and medical staff is concerned, I consider it in a very good state.

2522. You are a member of the Hospital Board? Yes.

2523. Does that work well now? Very well.

2524. With regard to the election of members, do you think that there should be any improvement in the way of making it more in touch with the public? I think that there might be some scheme devised by which the Hospital might be made more of a charitable institution, supported in part by the public.

2525. What do you mean? I think that the Board might be formed on something of the same basis as the hospitals at home,—that anyone who likes to subscribe a life sum, or anyone who subscribes, say, five guineas per annum, should be a Governor, but not until he pays his second subscription, in order to prevent packing at elections. Such subscribers to be Governors as long as their subscriptions continue, and a certain number of the Board should be elected by these Governors and a certain number by the Government. I think, however, that the honorary medical officers should not be elected in this manner, but by the Board, as at present; but then they would be elected partly by these Governors, so that the public would have a voice in their appointment. The Hospital would then be a charitable institution, not entirely under Government.

2526. Do you think that that would be an improvement? Yes. I think it would be a great improvement, and give the people in Hobart and the country more interest in it.

2527. You have had a good deal of experience in English hospitals? I have seen several hospitals in England, and have had a good deal to do with one, being resident one and a half years.

2528. You know how it is worked in Launceston, namely consulting medical officer instead of honorary medical officer? I do not think that that would be an improvement. I think the present system is best.

2529. In regard to paying patients, do you think it advisable to extend the accommodation for them? I think that if it is to benefit wealthy people, who can afford to pay large fees, and who would also pay the medical men attending them, such accommodation ought to be detached altogether from the General Hospital.

2530. There are a great many paying patients now? Yes, but the medical officers get no benefit out of it.

2531. You are aware of the system of the collection of these fees. Yes. They are collected in the country districts by the superintendent of police, for which 10 per cent. is charged, and in town by a collector.

2532. Don't you think that that is too much? I do not think that there should be anything paid. It leads to extortion in many cases.

2533. You are aware that a large amount is not collected? Yes. If you get a man that is not working for the work's sake, but for his own good, it does not suit him to press certain people. I think there should be some discretion exercised, and more power should be in the hands of the Finance Committee. I think that some are hardly pressed in the town, while in the country many escape.

2534. Have you come across any case of neglect in the Hospital? I have not heard a patient complain.

2535. No case of medical neglect has come to your knowledge? None at all. From actual knowledge. I only speak for my own patients, but have never heard of any belonging to the other honorary medical officers.

2536. *By Dr. Huston.*—Do you think that the Board as at present constituted fairly represents the public? Yes, I do; but I think the public would have more interest in the working of the Hospital if they contributed something of the expense, and in that way had more control over the management.

2537. Would it not cause friction? No, I do not think so. I think the two bodies would work together, and I do not believe that it would lead to much alteration in the Board.

2538. What proportion of the Board would you suggest should be elected by subscribers? I should think about one-third.

2539. *By Mr. Dobbie.*—Have you any idea as to what extent such a system as you have suggested would be availed of by the public? I do not know; it would be an experiment. I would make it compulsory to the extent that no man would be eligible for a seat on the Board unless he was a subscriber; and also that every honorary medical officer should be a subscriber of at least £5 5s. per annum.

2540. Do you think the proposal is feasible? Yes, and I think it would increase by degrees as people came to see that a certain advantage was to be gained by becoming a subscriber. Every subscriber got a certain number of recommendations for admission, and it was a great boon for a householder to be able to recommend a servant for admission. I think it would work well, and perhaps in the end lead to the Institution being entirely supported by the people, as it is in other parts of the world.

2541. Supposing that system were carried into effect, what would you mean by saying the honorary medical officers should be appointed by the Board? There is generally only one honorary medical officer elected at a time, and it is an office that there is more competition for than the ordinary membership, and it has been found that it very often leads to a certain amount of getting subscriptions in for the time being until a candidate gets his appointment as medical officer, then the subscriptions lapse; thus a man who has never done work, but has got money, gets in, whereas the man who has a claim and no money does not get in. In such a system a medical man should not be elected by the subscribers, but by the board.

2542. Would you continue the official appointment by the Governor in Council? Yes, that should be done as long as the Government continue to supply a portion of the income.

2543. *By Mr. Lewis.*—Do you think it is possible to have every medical man sending his patients into the Hospital and treating them there? No, I do not think it is practicable, because outside medical men would be under no control. Our honorary medical officer is to a certain extent under control, and the Board can refuse to elect him if he does not do his duty properly, and there would be endless confusion amongst nurses and the whole management.

2544. For how long are they elected? For four years, but one retires every year.

2545. Do you ever find any difficulty in inducing your patients to come to the Hospital? Only for the reason that they could not afford to pay fees. That is the only difficulty I have had, otherwise they jump at it as a rule.

2546. Do you say that the public have confidence in the Hospital management? As far as I can judge.

2547. Do you believe that the Institution is unpopular? No, I certainly do not believe that.

2548. *By Mr. Rooke.*—There are rules and regulations? Yes.

2549. Have they been revised recently? No, but it was suggested that they be revised at the beginning of the year, and then it was thought better to wait until after the Commission sat. I think that it is necessary to revise them.

2550. *By Dr. Huston.*—We have been told that some persons are charged more than 3s. a day—can you explain that? I suppose the reason is that they would have a special room to themselves. I know of one gentleman who was charged high, as he had a room to himself. The charge is for the room and the extra amount of attendance required.

2551. Do you think that persons of a certain pecuniary position should be allowed to come in here? I think that in accident or emergency you are bound to admit them, no matter what their position is, and also infectious diseases, although I think it would be much better if there was a place for such cases not attached to the Hospital, and self supporting.

2552. Do you approve of increasing the Institution for the accommodation of paying patients? No, I think they should rather lessen the number of paying patients, and that it should be a charitable institution pure and simple.

FRIDAY, APRIL 6, 1886.

DR. BINGHAM CROWTHER *called in and examined.*

2553. *By Mr. Dobbie.*—You are a medical practitioner resident at Hobart? Yes.

2554. You were formerly House Surgeon at the General Hospital, Hobart? Yes.

2555. With regard to the management and present condition of the Hospital, have you any cause of complaint? As to the present condition, I know nothing whatever about it, except that the public are most unfavourably impressed with its management.

2556. Taking the condition of the Hospital during the past two years, to which period we have confined our enquiry, are there any instances of fault or mismanagement you could state? Say during the past three years.

2557. We have confined our enquiry so far to the period during which the present House Surgeon has been here? Yes, I have known instances in which things were not satisfactory.

2558. Will you specify the cases? I mention Chester's, where a man sent with an order from myself for admission to the Hospital, to be retained (with a view to placing him under examination to ascertain his mental condition, as it was considered necessary by me that he should be watched well with this object in view), was sent by House Surgeon to Depôt. It was reported that the man's friends preferred his being in the Invalid Depôt, and, disregarding my order (that he was a case suitable in my opinion for detention and examination in the General Hospital for observation prior to sending him to New Norfolk,) he was sent to the New Town Depôt, and a scene occurred in consequence. He was sent out in a vehicle, and first caused a sensation going out, and then, (according to Mr. Seager's report), he nearly stabbed one of the attendants. His condition was considered so desperate that Dr. Barnard was communicated with that night, and gave an order for the patient's immediate removal to the Hospital, (which was done next morning.) The House Surgeon should have done what I or any other medical gentleman would have done. I would have respected the doctor's order, and said, "Very well, the doctor sees something evidently in this man requiring that he should be placed under observation, and in spite of the wish of his relatives I shall detain him." Instead of that he is packed off to New Town, his condition being rendered worse by the journey; he attempts to stab an attendant, and it requires two or three attendants to look after him that night, and next morning he is ordered back to the Hospital again.

2559. You consider that a case of neglect? A case in which the House Surgeon should have respected the order of a medical man.

2560. Do you consider it a case of neglect? I do not like to judge. It is one of those cases in which the House Surgeon should have respected my certificate, observed the man for a day or two, and then, if necessary, sent him to the Depôt. Failing to respect that order, a scene was caused which might have been disastrous to the attendants.

2561. Would you go so far as to say neglect was exhibited? I must leave that to you. I do not like to prejudice anybody. I merely mention a case which, in my opinion, shows a condition of things which should not have existed.

2562. Are there any other cases you wish to mention? Yes, there is the case of M'Donald, who went one night in agonising pain to the Institution.

2563. Can you give the particulars of this case? He went one night to the Institution, not having been able to pass his water for several hours. He was in agonising pain, and the House Surgeon made an attempt to pass the instrument into his bladder in the out-patients' room. The attempt failed, and the man for some reason or another was left with this instrument remaining in his passage. The House Surgeon had told him that there was no water in his bladder. The man went off disgusted. He took the instrument out, threw it down, and left the Institution. He then came to my brother and had his water drawn off at once. I think there was about a quart of water.

2564. Would you consider the case you have just described one of neglect on the part of the authorities—the treatment this man received? I cannot understand it myself. It seems an extraordinary thing that a man should stand there unrelieved with an instrument in his water-passage, and after waiting have to take the instrument out himself, and leave the Institution because he was not relieved. I merely leave the case to yourselves.

2565. Are not these catheters often left in the bladder passage for some hours to dilate it? I think not, under the circumstances of this case.

2566. In such a case the instrument would be left for a time to dilate? Not in this case. He went there for relief, and had been there before several times for the same purpose.

2567. Do you know the date of this case? My brother can give it you.

2568. Are there any other cases? Complaints are brought to us frequently. There was one within the last two days, in which a man suffering from inflammation of the lungs was kept waiting about in a way which had something to do with causing his death, but I have not the full particulars of this case, and will refer to it later on. In Chester's case there was a want of respect shown to a doctor's order, and a want of tact in not detaining the man for a day or two. Evans's child, (soiled linen.) Annie Moore, dish-water beef tea.

2569. You have seen the working of the Hobart Hospital as House Surgeon? I have.

2570. You have seen something also of the working of the Launceston Hospital, I think? I have.

2571. You know the two systems are different? Very different.

2572. Which do you think, for a hospital such as this, is the better system? With modifications, I prefer the system here. There are no subscribers to this hospital, consequently the whole organisation, the rhythm, of a large and valuable Institution is left in the hands of a coterie of some half dozen on a nominee Board. It is "I will nominate you, and you will nominate me, and so and so will be the medical officers." The Institution would be much more beneficially managed in the interest of the general public if a portion of the Board and honorary medical officers were nominated by the ratepayers and subscribers. (Talking about subscribers, I know one gentleman who offered £10 10s. conditionally upon the Government allowing him to have a voice in the nomination of the Board.)

2573. I wish you to answer first as to the medical officers, whether it is better to have honorary medical officers, each in charge of a certain portion of the patients, or have the whole of the patients under the Resident Medical Officer, the honorary medical officers being merely for consultation purposes, as at Launceston? I do not like the Launceston system. I was an honorary medical officer there, and found that the holders of that office were mere ciphers; besides, it is giving too much power to one man.

2574. Do you think it would be a practicable thing to have in connection with this Hospital private wards where patients could come who paid not only for their maintenance, but for their medical attention also? Certainly; and further than that, they should have the choice of their own medical attendant.

2575. Do you think it practicable? Practicable, advisable, and necessary for the general advantage of the country.

2576. I would first draw your attention to the fact that this Hospital is a charitable Institution. Do you think it a proper thing to have private wards attached to such an institution rather than have private hospitals? Yes. I think it right and necessary that an Institution like this should afford facilities for patients who are able to pay to be received and treated by the medical man in whom they have confidence. I approve of private wards being established in this Institution, so that any doctor can have his patients here from time to time, under certain rules as to fees, and under some control by the medical staff.

2577. How would you provide for payment to be made for such patients? At present patients who can afford to pay only pay for the use of the Institution, and not for their medical attendance. Would you adopt a similar scale to that now charged? A higher scale, according to the circumstances of the patient; I think it might be £2 2s. or £3 3s. a week,—much higher in special cases.

2578. Do you think such private wards would cause any difficulty in the management of the Hospital? I do not think it should. Imaginary difficulties arise in everything. I will give you a case which happened recently. A young fellow came all the way from Mount Zeehan with bone disease. Now if he could have come to the Institution by paying private fees and have me operate upon him there, he would have been glad to do so; as it is, he is placed at considerable disadvantage, being obliged to go into lodgings, and the case becomes more difficult to treat. The Hospital would have been enriched by this case. Look in Launceston how the funds are increased by the better class of paying patients there!

2579. In the absence of any provision for receiving such patients with a proper scale of payment for treatment, do you approve of the way the Hospital is now used by such patients? Certainly not.

2580. Do you think the Hospital, having regard to the fact that there is no provision for receiving patients who should pay for everything, should be used for these cases? In certain cases there are better means for treatment in the Hospital.

2581. But with reference to those cases that can be treated in their own homes? I think they should be treated in their own homes.

2582. Should the practice be encouraged or discouraged? It should be discouraged. (I do not allude to those cases of the poorer classes, who could pay a small fee such as £2 2s. for treatment in a private ward, to avoid the heavier expense of treatment in a private house or lodgings.) I do not think the rich should come to the Hospital at all. They should be treated in their own homes.

2583. Do you think there would be any difficulty in having a ward for homœopathi^c treatment in the Hospital? I think the homœopaths have a right to be represented.

2584. Do you think it could be done? I should be sorry to be too closely connected with homœopathy. I have a great respect for them, for they do as much as we do; but the two systems are entirely different.

2585. The two systems being different, do you think it practicable to have a homœopathic ward? I think the fact that homœopathy is believed in by a large section of the public should give them a right to some say in the matter.

2586. I ask if it is practicable? Difficulties would arise; but against that there is the fact that the system is supported by a large section of the people, and they have a right to a small ward.

2587. You think there are difficulties, but an endeavour should be made if it is possible? Yes.

2588. Assuming the practicability of that proposal, would it involve a separate dispensary for their medicines? Yes. Although, as far as I understand the principle, they assimilate our practice. I would give them a ward there.

2589. It would make no difference to the nursing? I think not; a little more cold water, and a little less something else—that is about all.

2590. You were speaking about the constitution of the Board. It has been suggested that subscribers should be allowed, and persons giving a certain subscription should become Governors, and these Governors should have the power of nominating a portion of the Board—would you approve of that? I do approve of that.

2591. Do you think that a better plan than having the Board or a portion of it elected by the ratepayers? I would like the ratepayers to have the power of electing a portion of the Board.

2592. How would you arrange the election? Simply state that so many seats were going to be vacated, and let the ratepayers record their votes for successors.

2593. What portion of the ratepayers? That might be settled; I merely suggest that it should be the choice of the ratepayers.

2594. Would you confine it to the ratepayers of Hobart? No, I would divide Tasmania into so many hospital districts.

2595. Would you have the Honorary Medical Officers elected in the same way? Certainly.

2596. Do you think that advisable? I think it urgently necessary.

2597. Do you think that a system of electing the Honorary Medical Officers in that way would improve the staff by leading to better men being appointed? I think the public are the best judges.

2598. As to medical skill? Certainly.

2599. At any rate, you think if the Honorary Medical Officers were elected that process would bring the best men to the staff? I say this, as distinct from the present system under which the Board nominate

their friends to give them a show, the ratepayers would prefer certain men from their knowledge of whose skill they would send them into this Institution, and would have the right to do so as they support it. They certainly would not elect a duffer, but would take men of the best skill and experience.

2600. When you were House Surgeon, how did you manage as to drugs—did you carry on the present system of ordering from England as you required them? Yes; every half-year there was a requisition.

2601. Do you approve of that system? Yes; you take an inventory of the drugs and ascertain what you require.

2602. Does it not lead to having large stocks? You must send every half-year, as drugs deteriorate.

2603. Do you think the plan adopted is better than purchasing drugs as they are required, in the local market? Yes; because it gives a guarantee that you get the best article.

2604. In regard to cost? It is very much more economical to import them.

2605. *By Mr. Lewis.*—If the Honorary Medical Officers had to be elected by popular vote do you think they would submit themselves to such election? As a matter of fact they submit to it in Melbourne—a city of great advance, and the centre of civilization in Australasia.

2606. Do you think they would? I do not go by anyone's private feelings; I go on the principle.

2607. Whether, as a matter of fact, the medical men here would submit? Certainly. I think the medical men here, at any rate the best of them, would see the justice of such an election; if they did not others would.

2608. That is not an answer to my question. I want to know whether in your opinion they would submit themselves? I have answered in the previous question.

2609. Under whose control? I suppose under the Board. There must be a head.

2610. Under whose control would medical men be if they were allowed to meet private patients in the Hospital? It would be difficult under the present *régime*, because if they did not like a particular man it would lead to his being excluded from the Institution.

2611. How would you do it? I admit it would be somewhat difficult, but could be arranged for.

2612. What alterations would be necessary? I have suggested that the Board should be partly elected by the ratepayers, and the honorary medical staff too.

2613. Under your system, by which every medical man would be able to treat private patients at the Hospital, what control would there be over them? That is a subsequent consideration. There must be a head, and the Board is that head, and, with certain modifications, which might possibly be brought about, you would get over the difficulty suggested. But at present certain medical men are excluded from the Institution, and there is no reason why the public should be debarred from the services of these gentlemen.

2614. Would you be of opinion that the Board should have the power of excluding a medical man at any time from sending his patients to the Hospital?—if not, what control would you have? Against that the public have the disadvantage of not having their own man to treat them. Take my brother, for example: if you polled the town I suppose he would have the largest number of adherents professionally, yet that man is excluded from the Institution, and the public suffer inconvenience and loss through that man's skill not being available in the Institution. The interests of the public would best be served by giving every medical man power to treat patients in the Hospital. How it can be accomplished I do not at present know; I am merely pointing out a move in the right direction.

2615. Have you ever had any difficulty in persuading patients to come into the Hospital? The greatest difficulty. I cannot get many of them to go into the Hospital, except by promising to visit them. I have to adopt this decoy to get them to consent to go, and it is only such means being used by the medical man in whom they have confidence that can induce them to go. A large number of people feel it a loss that they cannot be treated by their own man. In the case I have mentioned of the young fellow with the bone disease, though he desired that I should attend him I felt it was better that he should go to the Hospital than have expensive lodgings.

2616. Is there any trouble about getting a supply of trained nurses? From time to time there may be a difficulty caused by a little extra pressure when the demand exceeds the supply, but usually there is no difficulty about getting nurses.

2617. Would it be desirable to institute a system by which nurses could go through a course in the Hospital, and so be available as trained nurses for private medical practitioners? I think it would be desirable if we had such a class to fall back upon; but, as a matter of fact, I think there are sufficient skilled nurses available.

2618. *By Mr. Brown.*—Have you any idea how long it was from the time M'Donald left the Hospital till your brother operated upon him? He went at once to my brother, the same night.

2619. When your brother operated on him did he find any difficulty in passing the catheter? No, and he drew a quart of water. We have both had similar cases before, and found no difficulty. We have both drawn this man's water off on numerous occasions without the slightest difficulty.

2620. How long was the man waiting for relief at the Hospital? Some considerable time; of course it might seem longer to him; about 30 minutes probably.

2621. The whole of this statement comes from M'Donald? Well, coming to my brother immediately afterwards, he would certainly notice that the water-passage had recently been operated upon; besides his own family can state that on a certain night he came to the Hospital. He himself is a very trustworthy man, and has been some years in the employ of the Corporation.

2622. You will furnish particulars as to time and date? You can ask my brother.

2623. With regard to the Board to be constituted as you suggest, would you give that Board the power of controlling every medical man having private patients in the Hospital? Yes.

2624. I mean would you in a case of malpractice or neglect empower that Board to discharge the

medical man? Just as there must be a head over everything so there should be a head over these medical men. At any time that it was desirable to consult they should be consulted, and any capital operation should be under the control of the whole staff.

2625. Would you give power to prevent them coming to the Institution in consequence of failure of duty? Yes.

2626. Then these medical men would have the same cry against the Institution—that they, being popular men, could not come and treat their patients at the Hospital? It could not be done with the existing constitution of the Board.

2627. In fact, the whole thing would have to be reorganised? Yes. There would have to be a reorganisation, so that the people would have particular men of skill and ability represented in the Institution.

2628. With regard to the homœopathic ward, I take it from your argument that the homœopaths should be in the Institution as well? I think so, because a proportion of the public are in favour of homœopathy.

2629. You recommend, then, that a homœopathic ward should be in the Institution? It is difficult to say how it can be established, but it should be, for the reasons mentioned. Again, those persons who wish to give their services on one or two days a week to the out-patients should be enabled to do so gratis. I think a number of medical men would avail themselves of this opportunity, instead of having them flock to their houses, as they do now.

2630. *By Dr. Huston.*—Do you know any Hospitals that do admit private patients in the manner you indicate? From what I understand, the Melbourne Hospital, for instance. A number of patients consult outside doctors about operations, and they advise their going into the Institution, where operations are performed by them. Of course, if it is a rich patient he may be taken to Scott's Hotel or anywhere else.

2631. I ask, do you know any Hospital that admits private practitioners' patients to be attended by their own medical man? I cannot recall them just at the present moment. The cause of the opposition to the present system is that a large portion of the public are debarred the Institution, and from attendance by their own medical men.

2632. *By Mr. Gill.*—Would you submit yourself, Doctor, if nominated for the position of honorary medical officer, to election by the people? I would submit myself. If a man were not a desirable man he would not be elected to the position, and if he were a desirable man, and one in whom the ratepayers had confidence, they would elect him.

2633. If the ratepayers elected the Board should not that Board have control over the medical officers? Certainly.

2634. Do you think there would be any more expense in carrying on the Institution under such a system? The expenses of election would be very little, and the number of pay patients very much larger, and the expense to Government therefore less.

2635. What suffrage would you adopt? That is a matter of detail. I would like a portion of the Board elected by the ratepayers and subscribers. I cannot state the exact way.

2636. You have been an officer of this Institution? I have.

2637. Do you know whether it is worked on the same principle now as when you were here? I do not know anything about it now. I understand a great deal of friction has been caused by a lot of Scotch nurses, as proved by the Public Parliamentary enquiry last year.

2638. Have you had anything to do with insane patients? Not specially.

2639. Do you know the Cascades Asylum? Yes.

2640. Do you think that asylum should be left without a resident medical officer in charge? No, not with the class of patients that are in it.

2641. *By Mr. Brown.*—You have had some experience of the Campbell Town Hospital? Yes.

2642. Do you think that Institution should be kept up? Do you mean for special cases? I think arrangements might be made with local medical officers for accidents, but there might be cases difficult to remove.

2643. You found it a useful Institution? Yes, very useful. There are cases from time to time which make it most desirable that the Institution should be there.

2644. *By Mr. Dobbie.*—Is there anything you wish to suggest or add to the evidence you have given the Commission touching the condition and management of this Institution? In any piece of machinery like that if there is a cause of serious friction (take, for instance, the late Scotch difficulty) anything that can be done to remedy such friction the better for the Institution.

2645. The evidence we have is to the effect that there is no friction at all, and that everything is going on smoothly? There seems to be a little friction. I would like that case I casually mentioned to be left open, as it is connected with the present management of the Institution. [Mr. Dobbie: You may add it in writing.] If evidence was taken upon oath, and an indemnity granted to servants and others so as to protect them, you would ascertain that a very unsatisfactory state of things has for a long time existed, and actually does so now. On 8th March, 1888, the relatives of a man suffering from inflammation of the lungs arranged with the porter (gateman) of the Hospital for the immediate admission of a patient, to save delay on arrival, the man being dangerously ill. Brought to the Hospital early in the afternoon, and kept waiting (before putting in bed) some half-hour. Complained of the cold place he was in (there being stone flagging to his feet) prior to being placed in bed. Died on the 10th of March. His relatives and friends are most unfavourably impressed with the delay, &c.; but like other cases (beef tea and dirty linen, mentioned before), decline (except being made to on oath) to give publicity to the same.

DR. BENJAFIELD *called and examined.*

2647. *By Mr. Dobbie.*—You are a legally qualified medical practitioner, practising in Hobart? Yes.
2648. Have you experience in Hospital treatment? Yes.
2649. Do you know anything of the management of the Hobart Hospital? Only what I gather from patients who have come out of it.
2650. Have you had any complaint made to you by these patients of their treatment in any particular? Yes, a great many.
2651. Were those complaints of a serious character? Yes.
2652. Are the complaints to which you refer of recent date? No.
2653. What is the latest of them? Within the last year.
2654. We would be very glad if you would specify cases? Before specifying, I may state that there is generally a much better feeling of satisfaction regarding the management and treatment at the Hospital within the last year than there was prior to that.
2655. Do you think it necessary to specify cases? I do not mind.
2656. For instance, will you specify any cases during the time the present House Surgeon has been at the Hospital, we having confined our enquiry to that period of time? Yes, such cases as came under my notice. Until last year I made notes of a great number of cases of complaint, and got people to sign them sometimes; but during last year people have been much better satisfied. I ask everybody I know, and found that during the last twelve months they have been much better satisfied. To give an idea of the general feeling, within the last two or three days I have had occasion to send two or three patients in here, and it was very difficult to get them in. I had one only last night, and it was nearly coercion to get her to go to the Hospital. Their unanimous cry is, "If you will attend me I will go in."
2657. Do you think the disinclination to go into the Hospital of which you speak arises from bad treatment, or because patients desire practitioners to whom they are accustomed to continue treating them? I think part is owing to the reputation of the Hospital, and part is owing to the feeling that they would like the practitioner attending them to go on with them. Of course for the woman who came in last night it is a very great alteration of treatment to go from my treatment to the allopathic treatment.
2658. That could not be attributed against the Hospital? No, of course not.
2659. Have you any case of bad treatment? Supposing I give you a case I sent in about a year ago. A man working for me was suffering from an acute chest disease, and I sent him in with a certificate to that effect. He was here for six weeks, and when he came back I asked him what he thought of it, and how they had treated him. Well, he was most strong in his expression that they had nearly killed him. I said, "Well, who treated you?" "Dr. Lever, I believe it was, one of the House Surgeons at any rate;" and I then asked him, "Were you not under any honorary medical man?" He did not know anything about this, and I asked, "Did not an honorary medical man ever examine you?" He replied, "No;" and was most positive that no honorary medical man had ever examined him, offering to swear it. And he was here for six weeks, and I had to use a great deal of persuasion to get him to go into the Hospital.
2660. What is the man's name? That I forget. I always called him "Yorkey" on my farm. He is one of the old hands, and when I asked him to come and make a statement before the Commissioners, he said, "Well, I do not know; I might have to go to the Invalid Dépôt, at New Town."
2661. What kind of man is he? An ignorant sort of man. He had been in the Invalid Dépôt at New Town.
2662. Do you think he could have made a mistake about not having been examined by an honorary medical officer? No, because I went over it two or three times, and he was positive.
2663. Did he complain of the treatment? He did not complain of the nursing or food.
2664. What was his complaint? Pleurisy, and he complained simply of the medical treatment, which he thought very much too severe, and that the House Surgeon alone had attended him.
2665. Is there any other case of which you can speak? No; during last year the feeling has been very much better among the people who came to the Hospital.
2666. Do you think that is because the Hospital management has improved, or do you think delusions have been removed from the minds of the people? Oh, I think the Hospital management has improved.
2667. Can you account in any way for the feeling of distrust?—would not a prejudice against the management cause distrust? Undoubtedly it would, but these charges had foundation.
2668. They have never been proved: take the cases investigated by Mr. Jackson and the Committee? If such cases as "Yorkey's" were brought here, they would be dumb—literally frightened.
2669. Why? Because these men believe they will have to come to the same Institution again. Some of them come from Port Arthur, and would not like their names mentioned too much.
2670. You think the Hospital management has improved during the last twelve months, although practically the same people are in charge? Yes.
2671. Of course any case sent to the Hospital is treated on a different system to yours. Do you think there should be in this Hospital some arrangement by which people desiring to be treated by your system of practice should have the opportunity of being so treated? The question goes without answer. I have a very strong opinion about it indeed. I have a copy of a petition presented to the Board three or four years ago, and you will see by that that nearly all the wealth and influence of the Island signed that petition. I have a very strong opinion about it. If you had seen the woman I have already referred to lying last night under typhoid fever, whom I had to compel almost to go to the Hospital and be treated under a system she did not believe in, you would see the reason for my opinion.

2672. Do you think some would come who do not come now? I have no doubt of it.

2673. Do you think there would be any difficulty in carrying out such a plan? Not the slightest.

2674. Any friction with the other medical officers? I do not think so. I am on very good terms with all of them so far as I know.

2675. It has been suggested to us that in such an event some Medical Officers would refuse to meet you in consequence of your practising a different system? One or two might not; but most of them would.

2676. Would it make any difference in the nursing? No.

2677. As to dispensing—would there require to be a separate dispensary? No; every allopathic chemist knows how to dispense homœopathic medicines when they are prepared for dispensing.

2678. Then you think the present dispenser could dispense such medicines? Certainly.

2679. Do you approve of the plan adopted here of having honorary medical officers who share the charge of the patients between them? No; I consider that being a State-paid institution, towards the support of which each of us pay, any medical man should be allowed to attend patients there.

2680. Do you think that plan would work? I think it would.

2681. For instance, what control would the Board of Management have over private practitioners attending patients in the Hospital in that way? They would have to submit to precisely the same rules as the honoraries do now.

2682. The honoraries are now subject to the control of the Board; but if you allow outsiders to come in what mode of control would you suggest? I should like some mode of control better than that existing at present: the medical man not attending his cases regularly should be struck off the list.

2683. Do you know any Hospital where such a system exists? I have never had anything to do with a State-paid Hospital.

2684. But with any Hospital? Well, they come under different heads. In London the subscribers have votes.

2685. Then you distinguish between them? Yes.

2686. Now with regard to the way the Hospital is supported: do you think it would be a desirable thing to have the Hospital supported, if possible, or partly supported, by subscription, and that subscribers should elect a portion of the Board, rather than the existing system of the whole cost being paid by the Government? I do.

2687. If that were brought about what portion of the Board should be elected by the subscribers? That would depend upon the amount of subscriptions.

2688. The probability is that the Government would have to pay the greater part of it: what proportion do you think should be nominated and what proportion elected? I cannot deal with that, because you might suppose a case in which the contributions were very small indeed.

2689. In any event what would be the maximum number you would propose should be elected by subscribers—one-third or one-half? If I had the amount of subscriptions, I could give an answer. I confine myself to the principle that subscribers should have a voice and a right to send in patients, as they have in other countries.

2690. Do I understand your suggestion to be that in any case the whole of the practitioners might attend the Hospital and attend patients? Yes.

2691. Would you have any honorary officers then? I would have them all honorary officers, and regularly enforce attendance, so that they should attend patients regularly, and not once a month.

2692. Have you considered the question of private wards in the Hospital, where patients who could afford to pay for medical attendance, as well as for maintenance, could be treated? Yes.

2693. Do you approve of a suggestion of that kind? Yes, thoroughly.

2694. How would the patient pay for medical attendance? That would be a matter of contract between the patient and the medical attendant. He should pay for his maintenance and attendance by the House Surgeon and nurses. Suppose a man has an obstruction in his bladder, and his own medical man saw him once a day, it would still be necessary for his water to be drawn three or four times a day, and that would come under the duties of the House Surgeon. The House Surgeon and nursing charges should be included in the Hospital fees.

2695. Do you think it would require a separate establishment altogether to carry that plan out? No.

2696. You think it might be attached to the Hospital and work satisfactorily? Yes.

2697. In the absence of any provision of that kind, do you think it is a proper thing for the Hospital to be used by patients suffering from accidents or maladies who could be treated at their own homes, and could afford to be so treated? No, I do not think so. It is improper.

2698. Except in cases which can be better treated in the Hospital than in a private house, or when the people cannot afford proper treatment at home? Even in those cases I think the charge should be more than £1 a week. There are other cases here which I think should be discouraged. I think all venereal diseases ought not to be there, and stay for treatment; also *delirium tremens*, and anything brought on by a man's own misdeeds.

2699. What would you do with these cases?—take the case of paupers, unable to pay for private treatment, suffering from venereal disease or *delirium tremens*? I would take very strong measures for getting it out of them, if the case was obliged to come to the Hospital. Cases of syphilis ought to be treated outside; they do not need to be treated in here.

2700. Where such cases can be treated outside of the Hospital, then, you think they should be refused admission on account of the character of the disease? Yes.

2701. *By Mr. Lewis.*—From your knowledge of the people of Tasmania do you think it likely they would subscribe willingly and largely to the Hospital if they had an inducement to do so in the right to elect one or more members of the Board? I know my patients would, but I cannot speak for the others.

2702. Excluding your patients altogether, do you think the general public would subscribe? I do not see any reason why Tasmania should be different to all the world beside.

2703. If it were decided to treat cases homœopathically in the General Hospital, would it be necessary to have a separate ward for such cases, or could they be treated in the general wards? Quite well in the general wards.

2704. Have you any idea how many cases (quite roughly) would be sent in during the year to be treated homœopathically? I could not guess.

2705. Would it be necessary to get some different drugs? Yes.

2706. To any great extent? No. You see the cost of treating cases under our system would not be more than one-tenth of the cost of treating cases under the allopathic treatment, in drugs.

2707. Have you ever seen in your professional experience any cases from which you would deduce the fact that the patient had been treated wrongly, or to any serious extent, by the medical staff in the Hospital—I mean patients who have left the Hospital and gone to you—have you ever seen any symptoms of seriously wrong treatment in these patients? That would be rather a reflection to answer that.

2708. I will put it in this way—have you seen any case of wrong treatment or malpractice, surgically? I would not like to make reflections. Typhoid fever treatment has been very unsuccessful.

2709. Taking the question of surgery first, whether anything wrong has been done to your knowledge? Well, surgically, I will give you a case, for I do not know that it reflects upon anybody. A man from Burden's had injured his thumb and came to the Hospital as an in-patient. A consultation took place, and it was decided to take the man's thumb off. His friends got him out and subscribed my fees and sent him to me. I treated the case, and got the man well without taking his thumb off. He got quite right again until he died of typhoid fever this year. Is that such a case as you want? I do not know that I can say more about it. He went back afterwards and showed them his thumb, and they admitted it reflected credit upon the treatment.

2710. Are such cases in which you see signs of wrong treatment numerous? I would not say that was malpractice at all—it was a difference of opinion. No, they are not frequent.

2711. *By Mr. Gill.*—In the event of a homœopathic ward being established here, there being no other medical man practising that system in Hobart, would you attend free patients gratis as honorary medical officer? Yes.

2712. Do you not think there should be some classification of patients? Could not patients who would not be expected to pay for their maintenance be put in a separate part of the Institution so as to relieve their minds of the fear of having to pay? I think they should be told.

2713. Does not the absence of this information retard recovery in some cases? I think the circumstances of a patient should be enquired into when first he comes in, and they ought to be told within a few days whether they would be expected to pay or not.

2714. You have been fortunate in your treatment of typhoid fever? Yes, and in regard to that I would consider the question of stimulants. I do not believe in stimulants in typhoid cases, and in this Hospital large quantities of stimulants are used. Now in such cases as that we differ in treatment, not only in drugs but in food treatment, and the result has justified the treatment I adopt.

2715. In the event of the medical officers being elected by the people, would you object, if nominated, to submit yourself for election? No, I should not object.

2716. *By Mr. Dobbie.*—Do you know anything of the New Town Charitable Institution? Yes, a little.

2717. Is there anything you can inform the Commission of with regard to that Institution? I can give you two or three cases which have come under my knowledge as to the working of the Institution. Within the last twelve months I went and asked the authorities to give me some old men to potter about my ground, and look after some drains I have. I was to find lodgings for the men and give them fifteen shillings a week. I was told that there was plenty fit to go to work, but that I lived too near the public-house. They afterwards sent me two men, and I put them on piece-work, as they were not satisfied with fifteen shillings a week, and they made thirty shillings a week, week after week. When paytime came they went to the public-house and spent it. I then went to the Institution and said, as a ratepayer, "These men are not to be re-admitted into the Institution, because they are able to go to work and earn money and then drink it all." As a matter of fact I knew these men were admitted to the Institution again; one of them gave me a week's notice and drew £4 10s., and within a week was back in the Institution.

2718. What was the state of his health? Very good.

2719. In your opinion he had no right to be in the Institution? No right at all. He struck for higher wages, as he would not work for fifteen shillings a week, and went back to the Institution.

2720. Do you happen to know who gave him the order? No.

2721. Could you give us the man's name? He goes by the name of "Yorkey." Then another case came under my observation which is even more glaring than that. A girl got pregnant, and went into the Institution for seven months during her pregnancy. She had her baby at Mrs. Cullen's (the lying-in hospital), and then went back to the Institution again. She got out, and went straight off and got pregnant.

again. Then she went back to the Institution for seven months, and had her baby at Mrs. Cullen's again. At that time I wanted a wet nurse and got her out, but after a bit she told me she wanted to go back to the Institution.

2722. Was she a young girl? About 20. I told her she should not go back to the Institution; but she went there, and when I afterwards saw her, wanting a wet nurse for a gentleman in town, where she would receive £1 a week, she coolly refused to go, as she would rather stay where she was.

2723. Any other case? The other case is of an old man, the same as this "Yorkey," but I cannot spot out the identical one. This other old man went back to the Institution. He was a man able to work, and when I went there I was told that there were plenty able to work, but they were afraid of the public-house.

2724. You are of opinion that these men were not proper cases for admission to the Institution? Very strongly. Some few years ago I offered to go and examine these men gratuitously for the Government and send in a report, but they refused, as they considered it would interfere with their officers.

FRIDAY, APRIL 6, 1888.

DR. T. C. SMART *further examined.*

2725. Do you know anything of the patient M'Donald, who was treated as an out-patient of the Hospital in 1886? Yes, but I think he was an in-patient then.

2726. What was he suffering from? I had the statement from himself, and partly from the Secretary: he was suffering from retention of urine. He stated he had been in the Hospital for some days and had had an instrument used successfully, but, as he explained, it was not during the day that this troubled him. The stoppage usually took place in the night, and he was in great pain. The case to which reference has been made as a grievance was that one morning about 4 o'clock he was seized with a stoppage, and went to the Hospital. The House Surgeon was called up, and succeeded in passing an instrument down to the stricture, telling M'Donald that when he went home he was to bathe in hot water. The House Surgeon left him in charge of the dispensary man, Peacock, and went away. He, M'Donald, stood four or five minutes with the instrument in, and then drew it out and went away. As soon as he got home he sent for Dr. E. L. Crowther, who succeeded in passing a catheter, when he passed water and was relieved.

2727. What was the nature of the complaint? From his own description it must have been a spasmodic stricture.

2728. In what respect does that differ from organic stricture? An organic stricture is more or less permanent, but the spasmodic form may come on suddenly without any warning, and be very troublesome while it lasts. It passes off generally after warmth and hot bathing, when the water comes as freely as usual.

2729. Is there any difficulty in passing the instrument? When the spasm is severe you cannot pass an instrument, but when it passes off you can do so easily.

2730. Do you think it is remarkable that it could not be done while the man was at the Hospital, and afterwards could be performed by another medical man? No, I do not think it remarkable. I have known cases where it could not be passed during the spasm; but could be passed half an hour or an hour afterwards with ease.

2731. You had the statement you made from the patient himself? Yes, I had the statement from the patient himself, and the whole time he was on the Hospital premises did not exceed a quarter of an hour.

2732. You were some time Chairman of the Official Visitors of New Norfolk Asylum and of the Asylum at Cascades? Yes, I was, for two years.

2733. You have already given evidence as to the Cascades Asylum? Yes.

2734. As to New Norfolk, can you tell us generally as to the way the Institution is managed and the patients treated? I can speak for two years—from the 1st January 1886, to 31st December, 1887. During all our visits, inspections, and investigations, which were numerous, nothing ever transpired to prove to us or to myself that there was anything wrong in the management, but, on the contrary, that the general management was, on the whole, good, and you will find it stated so in all the monthly reports of the Official Visitors. And with regard to the patients, no instance ever came under our notice proving that they were harshly treated, or in any way neglected, or badly clothed or fed; the contrary is reported in the monthly and annual reports of the Official Visitors. Everything in connection with the treatment of the patients was found satisfactory.

2735. Is the attendance sufficient? That is a matter chiefly for the Medical Superintendent; but I never heard any complaint, nor was any complaint made to us of a deficiency that was not supplied as soon as possible.

2736. Did you visit the Asylum often? The average would be twice a month.

2737. And on all these occasions a thorough inspection was made? Yes. The certificate you see in the monthly reports was filled up in the office after the inspection was made. Not one item was filled in till after the inspection was made.

2738. Were some of the visits made without notice? Yes, but as two official visitors had to be present when patients were discharged, it was frequently necessary that information should be given of the date of our visit.

2739. When you went without notice did you find the Asylum in the same condition as those occasions on which notification was sent? Always in the same condition. We have visited as early as 20 minutes after nine in the morning, going up by the first train, and we found everything orderly and regular. I have gone through the Asylum as late as nine o'clock, P.M., and seen the patients before going to bed, and found all orderly.

2740. Then you think that the management is what it ought to be, and satisfactory? Yes. Throughout the whole of the two years the official visitors had no reason to find fault with the management.

2741. Do you think that the Institution is sufficiently secluded? That is a question which has been much agitated. The general impression is that seclusion is absolutely necessary, but I think there is a limit to that. I do not think it would be wise to place such an Institution entirely away from all human intercourse, or out of the reach of life, movement, or anything that might attract the attention of the insane to the influences of the outer world. I believe that seclusion may be carried so far as to become a cause of insanity.

2742. Well, do you think the seclusion in this case is sufficient? I have thought over that attentively, and you will find it recommended in all the reports of the Official Visitors that it is advisable to acquire more ground. It would be a great improvement to take in Gray-street and Burnett-street. If that ground was included it would be all that would be required to render the Asylum as secluded as there was any occasion for.

2743. Do you think that the recommendations of the Experts should be carried out as to acquiring land and enclosing those streets? I agree that Burnett-street would be better closed and the land acquired.

2744. Is there sufficient land at present attached to the Asylum? If the land belonging to the Asylum was all available for the exercise and employment of the patients it would be sufficient, but the farm is not well situated, being detached and across the river and at a distance from observation. If land for garden purposes could be got near the Institution it would be much better.

2745. You think that what is wanted is garden land for the Institution? Yes; the employment of the insane could not be made of much value in agricultural work, but could be well applied to gardening purposes.

2746. Is not a great part of the labour utilised in chopping wood? Yes. And special reference is made to that in the annual report for 1887. I have always looked on it as a serious waste of labour, and the worst employment the patients could be put to as a constant thing. It is so confined and monotonous as almost to amount to a punishment, there being nothing in it to excite the interest of any human creature. It is nothing but see-saw from one week's end to the other. And it will be found strongly recommended in the reports that steam-power should be substituted.

2747. That is a matter in regard to which you think an immediate change should be made? Yes. In 1886 I was asked by the Government to furnish plans for their guidance, and these are the designs I now produce. In these plans there is provision made for yards and workshops in which all mechanical operations could be carried on. There is provision also for steam-power, wood cutting, steam laundry, &c.

2748. Nothing of that kind has been done? No.

2749. Do you consider that as a matter of urgency? I consider it of the utmost importance, and had I continued in office, and the Government provided the means, everything that lay in the power of the officials to forward these improvements would have been done.

2750. What are your other recommendations? I also gave a design for an Idiots' Home.

2751. Is that building in course of construction? Yes; the construction is being carried out on the plans submitted to Government, with the exception that there is more ornamental work than was anticipated, and an alteration has been in the back verandah by reducing the width from 8 feet to 5 feet, which I think has spoilt it. In 1885 the sum of £12,000 was voted by Parliament for these works. That amount has been absorbed, and other votes will be required to finish it. Remarks have been made about the want of sufficient recreation ground; but the recreation ground as shown on the plan contains $2\frac{1}{2}$ or $2\frac{3}{4}$ acres, and I consider it ample. There is plenty of room for football or cricket, but for gardening purposes extra ground is required. (Dr. Smart here explained fully the plan proposed.)

2752. The carrying out of the improvements suggested is a matter of money? Yes, and the estimated cost I put on it about £45,000.

2753. Are you still of opinion that those improvements are necessary and ought to be proceeded with? Yes; the recommendations of Drs. Manning, Dick, and Paterson as to the removal of all the condemned buildings being carried out.

2754. It has been suggested by Dr. Macfarlane that at present leave is of very little use to the medical attendants, and it has been suggested that the services of some medical man should be obtained, so that when one is away there is somebody else to do the work: do you approve of that suggestion? That matter engaged the attention of the Official Visitors in the early part of 1886. Up to that time there had been no regulated leave of absence. And as the system followed in the Hobart Hospital had worked well, it was thought it should be introduced at the Asylum, and this was done with some modifications. I confess I do not see the necessity for the temporary employment of a third medical man during the absence of a member of the present staff, but there is a great amount of clerical duty devolving on the Surgeon-Superintendent which should be reduced or removed, such as cash accounts, correspondence, &c. The Surgeon-Superintendent is allowed 35 days leave annually, and the Assistant Medical Officer 30 days; and after 4 P.M. (unless under special circumstances), one is at liberty to be off duty.

2755. You do not consider further concessions are required? I think if the Surgeon-Superintendent was relieved of some of his clerical duties, there would be no great necessity for it.

2756. Do you think that too many visitors are allowed? I never saw any harm arise from visitors being allowed in while I was there, but on holidays a crowd of strangers go about the Asylum, which I think hurtful. In this respect there should be some restriction.

2757. *By Mr. Lewis.*—Is there any official, such as storekeeper, at New Norfolk, who could assist in the clerical duties? Mr. Brownell is storekeeper and clerk, but his duties are very heavy. He has to look after all stores, and has a large amount of clerical work to do. I cannot point out how the difficulty could be got over except by the assistance of another clerk.

2758. Would this be temporarily during the absence of the medical man on a holiday, or do you recommend that the Superintendent be relieved of this clerical work altogether? I think he could be relieved of some of that work with advantage. It would enable him to devote his time more exclusively to the medical care of the patients.

2759. You are aware that there were certain acute cases sent from New Norfolk to Cascades? Some time last year five cases were sent there simply because there was no accommodation for them at the Asylum, the accommodation being required for other patients.

2760. Do you approve of such cases being transferred from New Norfolk, the tendency of course being to permanently maintain the Cascades? If you had the accommodation proposed in the plans there would be no need to send patients to the Cascades. The men sent were all old cases,—refractory, troublesome, and dangerous, requiring each to be kept in a separate room to the exclusion of other patients.

2761. You do not approve of the system of transferring except in existing circumstances? The sole reason and object of the transfer, so far as I know, was to make room for fresh cases coming into Hospital.

DR. BRIGHT *called in and examined.*

2762. What is your name? Richard Stenhewer Bright.

2763. You are a medical practitioner residing in Hobart, and an honorary medical officer of the Hospital? Yes.

2764. What number of years have you been honorary medical officer? Twenty-eight years.

2765. You have therefore a large knowledge of the Hospital and the management of it? Yes.

2766. What is your opinion of the condition of the Hospital at the present time? It never was better.

2767. Is that opinion confined to a recent time or does it extend over a period of two years? For several years; there has been very little change during the present House Surgeon's time.

2768. Then you think the management and working of the Hospital is exactly the same as it was before Dr. Parkinson was appointed House Surgeon? Yes. I speak from my own absolute knowledge.

2769. You have nothing to complain of in regard to the way the House Surgeons discharge their duties? No, I can generally find one of them there.

2770. With regard to the honorary medical officers, does the system work well? Yes.

2771. In regard to the nursing staff, is everything correct there? The nursing staff is excellent. I do not think you could improve it. You will find very few hospitals in the world like it in this respect.

2772. Do you find any difficulty in getting your patients to go into the Hospital? No.

2773. You do not find any distrust or fear? There is amongst a certain uneducated class, for the reason that they compare the Hospital now with what it was 30 years ago, not so much from what they know, but from what they have heard.

2774. Do you think that that feeling is induced by the reports circulated about the Hospital? I am quite sure it is kept alive by that alone, and engenders distrust and dissatisfaction, without the smallest foundation. Large numbers of people who have come to the Hospital in fear and trembling, have been amazed at the comfort and attention that they get. There is hardly one but who has said, "I never knew it was a place where we would be so well attended to, and if I had known I would have come long ago."

2775. Do you approve of the present practice as regards medical supervision, or do you approve of the Launceston method? The practice here is in accordance with all English hospitals; the other one is a system which is unknown in hospital management or work.

2776. Then you approve of the practice here? Yes; it was initiated in 1860 when the Hospital was handed over by the Imperial Government, and it was framed on the English county or provincial hospital system.

2777. From your experience does it work well? It could not be improved upon. I think the Launceston system would be likely to break down. It is practically making the medical men of the town subsidiary to the Surgeon-Superintendent of the Hospital.

2778. With regard to the working of the Board, do you think it works satisfactorily? There are some objections to be raised; but I think so, considering it all round.

2779. In your opinion is the Board fairly representative of the public generally? I think so.

2780. Do you think that there is any necessity of devising some better means of election of members? I do not see how you can frame any other means of election except on the principle proposed by the late Dr. Crowther. He brought forward a scheme to create a body of subscribers, and that the institution should be subsidised by the Government on the principle of £1 for £1. I think that the Government of the day would have been very glad to have adopted that scheme, but it failed through the public not coming forward with their money. As to an elective Board, I cannot see where you will get your franchise from.

2781. I believe the scheme, as proposed by Dr. E. L. Crowther, is to have election by the ratepayers; but how can you limit that? It is not only the town ratepayers that must be taken into consideration. The Hospital is maintained out of the general revenue, and if you are going to have election by ratepayers you must include all ratepayers, as the poorest shepherd in the bush has as much right to vote as the ratepayers in town, because he contributes to the general revenue.

2782. Suppose that there was some new scheme of election, do you think it would be wise to have the medical officers elected by that body? I think it would be the worst scheme possible, as it would lead to the election of the most active and the most unscrupulous.

2783. Would there be any difficulty in getting the best men? I do not think you would get the best men; you would get the most active and unscrupulous.

2784. In your opinion the staff would not be improved? It would deteriorate rapidly: such a scheme of managing an Hospital is unknown in the British dominions. The only alteration I can see would be to have them elected by subscribers.

2785. Do you approve of private wards being established in the Hospital? There is a great deal to be said on both sides. We find the want of them to a certain extent, but I should say we would have considerable difficulty in persuading Parliament to find the money to create practically a private hospital for the benefit of medical men. If you create a private hospital you must provide medical attendance, because you cannot expect honorary surgeons to attend them, and patients would be required to pay the same fees for attendance as were paid outside. Then there would be the difficulty as to medical attendance. Medical men would claim a right to come and attend to their own patients, and so the Hospital would be thrown open to a staff so large that it would not work.

2786. Would it be desirable to have private wards to treat cases arising out of accident, if the patient expressed a wish to be treated in the Hospital? I see no objection, if the patients paid for attendance. The room at present occupied by private patients is an operation room, and when it is occupied we are compelled to do the operations in the general wards. We have no private wards for patients, and this is an improper use of the operation room, and interferes with the work of the Hospital.

2787. Then you think that a few more rooms of that sort would be serviceable? It would not be objectionable, but the honorary staff give their services on the understanding that they are working for the poor, and if people of means come in and occupy those wards the medical men would require to be paid. If you take in paying patients you would almost require to throw the Hospital open to all the medical men in the place.

2788. Do you think that would be objectionable? I think it would be impracticable. No control could be established over the medical men. My hospital experience tells me that such a proposal is impracticable.

2789. Do you know any hospitals in which a system like that is adopted? I am not aware of one. I doubt if one exists.

2790. Do you think it would be desirable to establish a ward for homœopathic patients to admit of them being treated by that system? If you had a homœopathist on the staff of the Hospital, I say that it would be unworkable, and would disorganise the whole place according to the way the Hospital is at present worked. There are four honorary surgeons, A. B. C. & D.: all the patients coming in in one week go to A., so long as his beds can hold them. When his beds are full they go to the relieving man who has been the one to admit during the previous week. It then falls to B. to take his turn, and then follows C. and D. If you had a homœopathist on the staff he would have to take his full share of the patients, and we have never heard anything to show that a large number of persons desired to be treated by homœopathy. Then there can be no such thing as homœopathic surgery; it is just the same as general surgery, and for surgical cases there can be no necessity for homœopathy at all.

2791. If a person desired to be treated homœopathically he would naturally require to be treated by the medical man professing that? Yes, and he would either have too many patients or too few. It would be open to him to say this or that case is not suitable for homœopathy. That would give him an opportunity of picking and choosing the cases, and refusing all the dirty and unmanageable ones. When cases such as cancer and other incurable diseases, that no credit could be got out of, came before him he would say homœopathy would not suit them. Then in all serious cases the staff consults, but you could not consult with a homœopathist, because you have no common grounds to go upon. I do not think you will find any hospital where there is a homœopathist on the staff with the other medical men. Nor do I think that there is any demand for such treatment. There is a Homœopathic Hospital in London, with 300 beds, but in their annual report it is stated that they only treated 700 patients in 12 months.

2792. It is said that there is still friction going on, and that the nurses are not working amicably? I know the nurses are invaluable, and do their work in a style and manner beyond praise, and I have never seen or heard of any unpleasantness.

2793. *By Mr. Lewis.*—Do you think many subscriptions would come from the public? No, I do not think it. It was tried about 25 years ago by the late Dr. Crowther and failed, and I am satisfied that where he could have got ten guineas then we could not get one now. The public have got into the habit of looking upon the Hospital as a Government Institution.

2794. Do you think that patients well off should be refused? It is a public hospital, and I do not think you can refuse; but I think it is a great abuse of a public hospital that a medical man should be called upon to attend such cases without pay.

2795. And such a system should be discouraged? It has always been discouraged, except in cases that cannot be treated outside, such as cases of fever. During the prevalence of the fever epidemic it was impossible to obtain adequate assistance, and a number of paying patients were urged to come here, by myself among others, for the sake of the nursing.

2796. Can you suggest a remedy? The only remedy I can suggest is that they be treated as private patients, and charged accordingly.

2797. If so, would you recommend that private rooms be provided? No, because I think it would be an abuse of public money. I think there should be a private hospital, and if there was sufficient enterprise it might be done. I have often thought of doing it myself, or assisting to do it. I do not think that there

should be private patients in a purely Government establishment. If it was done in a hospital like this, it would require to be thrown open to all the medical men in town.

2798. Do you think that confidence in the Hospital is on the increase among the lower classes? I cannot say. I do not go hunting for malcontents, but I can say that the gratitude of people on leaving the Hospital is increasing.

DR. HARDY called in and examined.

2799. What is your name? James Arthur Hardy.

2880. You are a Medical Practitioner residing in Hobart? Yes.

2801. You have had some experience in connection with the General Hospital at Launceston as an Honorary Medical Officer? Yes, I was Honorary Surgeon in Launceston Hospital for a number of years.

2802. What is your opinion of the system of Honorary Surgeons here? I think it might be improved.

2803. In what particular? I think the system is neither one thing nor another. You have a system of so-called nominal Honorary Medical Officers, and you have a system of nominal House Surgeons who occupy the position midway between House Surgeon and Superintendent. In England you have the nominal House Surgeon system, who is not paid, but comes for the experience, practice, and knowledge gained, and who pays sometimes as high as 50 guineas; but here the House Surgeon is a much bigger man. I think it would be better to have the Launceston system, and the English system better than the Launceston.

2804. Your objection is to the responsibility being put on the House Surgeon? The whole responsibility should be on one man. In Launceston the Superintendent has the responsibility. The honorary medical staff is a pure farce, and are only sent for if Dr. Thompson thinks fit to send for them.

2805. Is not the House Surgeon subordinate nominally? As a matter of fact he does most of the work.

2806. I understand you to say that you approve of the system in operation in the Launceston Hospital? Yes, judging from the number of years I watched it, and the success it has attained. I did not approve of it at first, but I changed my opinion when I saw it work so well and satisfactorily. I think it is a very fair service.

2807. While you have Dr. Thompson? While you have a good man.

2808. You have sent patients to the General Hospital? Frequently.

2809. Do you find any difficulty in persuading patients to go to the hospital? I found a difficulty for a time when the dish-water soup business was being discussed, but except for that unfortunate condition of affairs I have not felt any difficulty. I have found many very glad to go.

2810. Do you attribute this repugnance to these stories? That, no doubt, frightened people, and also the stories about the bodies being mixed.

2811. Do you find that repugnance increasing? No, I think that there is less. I sent in recently 4 or 5 cases of typhoid, and did not find any difficulty.

2812. *By Dr. Huston.*—Do you approve of paying patients? I disapprove of paying patients being mixed with free patients. I disapprove of the system adopted here of paying patients being admitted. I think the two systems should be separate.

2813. How would you remedy that? I would make this Hospital entirely free, and have a rigid system of investigation, and allow no improper cases into it, barring cases of emergency that you cannot refuse. Hospitals are abused frequently. I have seen it in England as well as here. In Launceston a most rigid enquiry is made.

2814. Do you approve of private patients being admitted, such as those suffering from *delirium tremens*? I think there should be padded rooms provided, and such patients should be charged a fee in proportion to what it would cost them to be treated outside,—that is, three or four times what is charged at present.

2815. Do you know any hospital where there are private wards available for general practitioners? Yes, St. Thomas's, London, where I believe any practitioner can attend and charge fees, which vary from twelve guineas per week. It is an experiment, and has been discussed in medical papers, and so far it seems to have answered well.

2816. Do you think the Hospital Board should be nominee or elected? I would rather see it partially maintained by private subscription and the members partly elected from the subscribers, but while it is a government institution I think you might as well have a nominee Board as an elective one. As a matter of principle I think a nominee Board is not as good as an elective one.

2817. Don't you think that the public are fairly represented on the Board? Yes. I am not speaking of this Board, I am speaking of a principle. If you narrow it down to this Board, I think you have a very excellent Board.

2818. And fairly representative? Yes.

2819. Have you heard any complaints from your patients as to their treatment in the Hospital? No; I think that taking it all round I have heard less than I have heard in other places. People come out satisfied and grateful.

2820. What do you think about the establishment of a homœopathic ward? That means a homœopathic doctor, and it is impossible, as far as I can see, without making great alterations, that you could arrange to work such a ward. There are so many difficulties in the way of consultations, &c. Then in

the absence of the homœopathic surgeon, who is to treat those cases? Is the House Surgeon to practice as a homœopathist? There are so many difficulties in the way that I cannot see how you can arrange it.

2821. *By Mr. Brown.*—Do you think that the Medical Staff should be paid for attendance on paying patients? No. I think that would be interfering with all the medical men in town.

2822. *By Dr. Huston.*—Have you anything to add to your evidence? It appears to me that it would be a great advantage if a system was introduced of Assistant Medical Officers, and let one or two of the younger men be assistant surgeons to attend the out-patients, and to attend to the wards in the surgeon's absence. That system would be very useful if it was provided here, as elsewhere, that a man must retire at a certain period and become a consulting doctor. I suggest that the young men should be attached to the staff, and work up to a position on it. It would be a good system, and would take a lot of work from the House Surgeons,—for example, they could attend to the out-patients.

JAMES M'DONALD *called in and examined.*

2823. What is your name? James M'Donald.

2824. You are a labourer in the employment of the Corporation? Yes.

2825. Have you been at any time a patient in this Hospital? Yes.

2826. On more than one occasion? Two or three times.

2827. How were you treated? Quite well; I have nothing to complain of. I was treated as well as any man could be inside.

2828. What was your complaint? Water.

2829. Have you been treated as an out-patient? No; but I had occasion to come in once or twice during the night suffering from urine.

2830. Were you treated? Yes, by Dr. Parkinson.

2831. Have you any complaint to make? No. He could take no water from me, and I went home and sent for Dr. Crowther.

2832. How long ago is that? It was some time in 1886.

2833. What time was it that you came? About two or three o'clock in the morning.

2834. And the doctor was roused up? Yes.

2835. And passed an instrument, and you got relief? No, no water came.

2836. How long were you here? About a quarter of an hour. He operated twice, and could not get water.

2837. Did he leave an instrument in you? He left an instrument in me one morning, and went away into his own house. I asked the old man in attendance, and he said he has gone home to his own house, and I said then there is no need of me staying here, so I pulled the instrument out, and I was bleeding all the way down the street. On reaching home I sent for Dr. Crowther, who came with his cloak on, and in half a minute he took the water out.

2838. You went away yourself? Yes.

2839. Did the Doctor tell you? No; I asked the man to go and ask the Doctor, and the man said that the Doctor had gone home.

2840. Do you know whether the Doctor was coming back? I do not know; he did not come back while I was there.

2841. How long did you stand with the catheter inside you? I was standing there for 10 minutes holding the basin, and really and truly I thought I would have died of the shivers with the cold upon me. I said to the man, "For God's sake see if the Doctor is coming back," but he said the Doctor had gone to his house, and I said, "I will go for Dr. Crowther."



APPENDIX A.

PUBLIC Expenditure in the various Colonies of Australasia in connection with Hospitals, Benevolent Asylums, and other Charitable Institutions.

THERE is great difficulty in obtaining the necessary details for the purpose of analysing and comparing figures relating to the Charities of the various Colonies.

In some of the Statistical Records the statements are full enough as regards certain institutions, but are imperfect as regards others. In the greater number the most important details are often lacking:

The only satisfactory mode of comparison is to ascertain the cost per head of population as regards Public Expenditure. The *cost per inmate* cannot be obtained in this way, as the various objects of charity differ so much in each Colony, and a considerable portion is expended outside of Public Institutions, and the necessary information for such analysis is not given except by Tasmania, New South Wales, and Victoria.

The *cost per inmate* is also further complicated by the circumstances of each institution,—some being wholly or largely supported by the Government, others are only partially aided by the Government. This being so, the Government Statistician has been obliged to keep the *Public Expenditure* distinct from matters relating to the economy of particular institutions regarded by themselves.

The following Statement shows a comparison of the Public Expenditure on all forms of Charity in each Colony for the latest years in which the fuller particulars could be obtained.

EXPENDITURE.

Colony.	PUBLIC EXPENDITURE.			COST PER HEAD OF POPULATION.		
	Hospitals, including In-sane.	Other Charitable Expenditure.	TOTAL.	Hospitals, including In-sane.	Other Charitable Expenditure.	TOTAL.
	£	£	£	s.	s.	s.
Victoria	154,566	119,139	273,705	3.13	2.41	5.54
New South Wales.....	116,744	54,166	170,910	2.44	1.31	3.57
Queensland	56,915	27,812	84,727	3.32	1.62	4.94
South Australia.....	47,643	39,719	87,360	3.05	2.54	5.59
Western Australia.....	...	...	16,464	...	...	9.36
New Zealand.....	...	...	70,766	...	...	2.40
Tasmania	29,894	22,900	52,794	4.35	3.34	7.69

It will be seen from this table that, with the exception of Western Australia, the cost per head of population is very much higher than in the remainder,—the following being the order of the Colonies, beginning with the lowest cost :—

(1) New Zealand, 2.40s.; (2) New South Wales, 3.57s.; (3) Queensland, 4.94s.; (5) Victoria, 5.54s.; (6) Tasmania, 7.69s.; (7) Western Australia, 9.36s.

This relatively higher cost is not due to lack of economy in the local institution, as a partial enquiry shows the rate *per case or inmate* to be as low in Tasmania as elsewhere, so far as Institutions other than Hospitals are concerned, thus :—

Benevolent Asylums.	Cost per inmate.
	£
Victoria ..	20.39
New South Wales.....	14.24
Tasmania	14.22

The local General Hospitals, however, do not compare so favourably, if we may take Victoria as a standard :—

Cost per head of Inmate.	Average No. Daily Inmate.	General Hospitals.			Insane Hospital.		
		£	s.	d.	£	s.	d.
Victoria	1701.5	60	5	2	30	18	1
Tasmania {	Hobart.....	91	12	1			
	Launceston	70	14	5			
	New Norfolk....	278.0	...		34	7	4

But it must be borne in mind that in the larger centres of population centralization of patients lessens *relatively* cost of machinery and equipment: *e.g.*, owing to this cause, Waratah Hospital cost £262 15s. 6d. per head of daily average inmate, although cost absolutely was only £1051 per year, to Hobart £7053 per year.

There is one point, however, that is clear, viz., that the cost of maintaining General Hospitals in Tasmania falls more upon the Central Government and less upon private effort than in Victoria. Thus, private effort in the latter Colony subscribes or provides over 57 per cent. of the revenue of the General Hospitals. Only 19 per cent. of the revenue is raised from private sources for Hospitals in Tasmania.

Mr. Hayter states that in Melbourne and suburbs during the month of October in each year the last Saturday and Sunday are set apart for making collections in aid of the Charitable Institutions, and is warmly taken up by the Clergy of all denominations, who preach sermons in aid thereof on these days. Superintendents of Sunday Schools and other Schools, also business people, devote much energy to the collection of subscriptions on these days.

Perhaps the absence of organisation locally may have accounted for the lack of private effort in Tasmania towards the support of Benevolent Institutions, and it is no doubt *in part* due to this lack that the relative expense of Charitable Institutions borne by the General Government is heavier than in the greater part of the other Colonies. There are other reasons, no doubt, such, for example, as the extraordinary number of old persons who are either sickly in Hospitals or indigent in Asylums. This is indicated by the very high relative number of inmates in Benevolent Asylums as compared with Victoria and New South Wales :—

<i>Benevolent Asylums.</i>	<i>Inmates, Daily Average.</i>	<i>Inmates per 1000 of Population.</i>
Victoria.....	1851	19
New South Wales.....	1888	19
Tasmania	820	58

The Statistician trusts that, although he has not been able to give more satisfactory tables of comparison, that the observations now made may prove to be of some service to the Royal Commission.

ROBT. M. JOHNSTON, *Government Statistician.*

APPENDIX B.

COMPARATIVE Return of Rations and Cash issued for Ten Years past.

<i>Year.</i>	<i>Rations.</i>			<i>Cost.</i>	<i>Cash.</i>	<i>Total Cost.</i>	
	<i>1.</i>	<i>2.</i>	<i>3.</i>	<i>£</i>	<i>£</i>	<i>£</i>	
1878.....	6027	2220	395	1353	1121	2474	Three last years' Government Disbursement.
1879.....	6027	2077	327	1264	1120	2384	
1880.....	5070	2128	267	1119	1120	2239	
1881.....	4135	2049	199	957	957	1914	Saying effected through B. S. Agency.
1882.....	4101	2003	239	951	734	1685	
1883.....	3458	1676	349	822	731	1553	
1884.....	3474	1409	383	789	750	1539	
1885.....	3315	1145	379	725	760	1485	
1886.....	2891	890	396	626	830	1456	
1887.....	3203	764	418	657	890	1547	
						£4494	

Estimated Cost of Rations, 3s. each.

SCALE of Rations.

<i>Scale.</i>	<i>Bread.</i>	<i>Tea.</i>	<i>Sugar.</i>	<i>Rice or Oatmeal.</i>
	<i>Loaves.</i>	<i>ozs.</i>	<i>lbs.</i>	<i>lbs.</i>
1	8	6	2	2
2	4	8	3	4
3	—	12	4	4

No. 1 given, as a rule, to families. No. 2, Aged Couples. No. 3, Single Persons.